

DOCUMENT RESUME

ED 357 003

SP 034 336

TITLE The Clinical Schools Project.
INSTITUTION San Francisco State Univ., CA. Dept. of Elementary Education.; San Francisco Unified School District, Calif.; United Educators of San Francisco, CA.
PUB DATE [Feb 92]
NOTE 107p.
PUB TYPE Reports - Descriptive (141)

EDRS PRICE MF01/PC05 Plus Postage.
DESCRIPTORS Case Studies; *College School Cooperation; *Educational Environment; Educational Objectives; Elementary Education; Graduate Study; Higher Education; *Preservice Teacher Education; Program Development; *Program Implementation; School Districts; School Role; Teacher Role
IDENTIFIERS *Clinical Schools; *Interorganizational Relationships; Partnerships in Education; Preservice Teachers; Professional Development Schools; San Francisco State University CA; San Francisco Unified School District CA

ABSTRACT

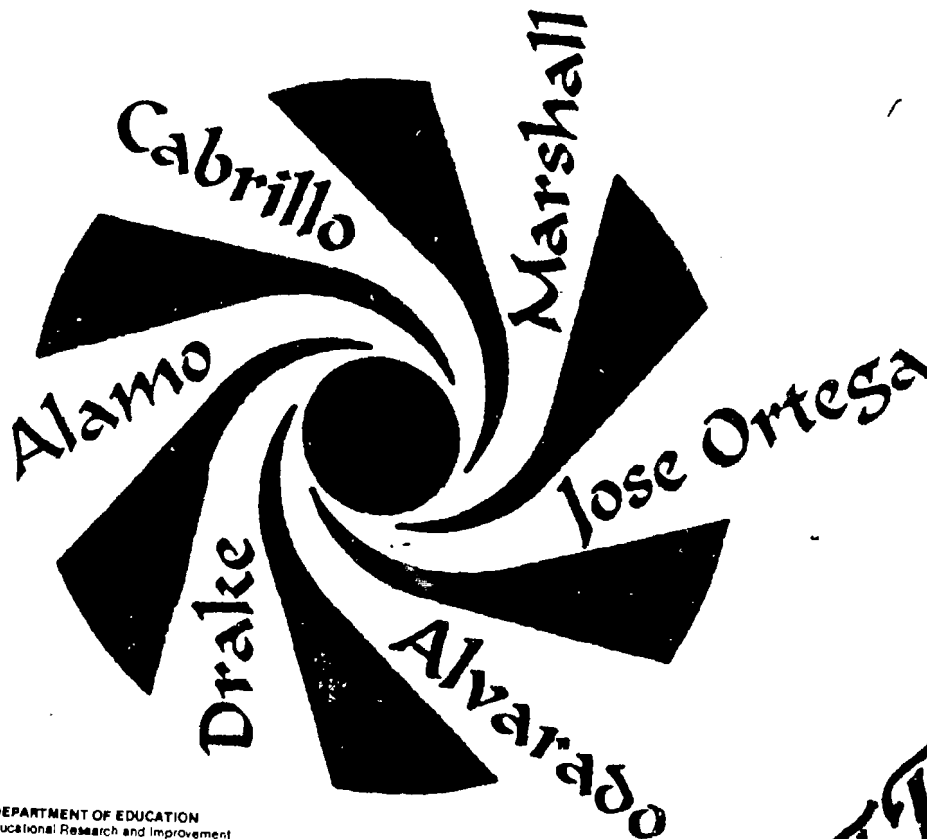
This description of the Clinical Schools Project (a partnership which includes San Francisco State University, San Francisco Unified School District, and United Educators of San Francisco, California) contains a project description, three papers, and a proposal for establishing the project. The project description outlines the project, defines a clinical school, identifies the six public schools that participated in the project, lists program personnel, outlines roles, and provides copies of training agendas. The first paper, "Everyone on Center Stage: Efforts toward Effective Collaboration in the Clinical Schools Project San Francisco State University," analyzes some of the problems encountered while trying to effect collaboration among the partners during the program's first year. The second paper, "A Clinical School Evolves," explores the phases through which the project evolved at one site (Jose Ortega Elementary School) and addresses concerns related to the most recent phase from the perspective of the university facilitator, classroom teachers, and site administrator. The third paper, "Interorganizational Linkages & Interprofessional Relationships: The Clinical Schools Project," briefly describes the initial implementation of the project, identifies and examines tensions associated with forming interorganizational relationships, and suggests ways to facilitate linkages. The proposal includes an outline of the experimental, 3-semester preservice graduate teacher education program. The Clinical Schools Project is one of the five sites within the AT&T Teachers for Tomorrow program. (IAH)

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The Clinical Schools Project

SAN FRANCISCO STATE UNIVERSITY
SAN FRANCISCO UNIFIED SCHOOL DISTRICT
UNITED EDUCATORS OF SAN FRANCISCO

ED357003



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"We are a community of learners Each of us is the pupil of whichever one of us can best teach what each of us needs to learn."

*Maria Isabel Barreno
Portuguese Poet, Writer, Educator*

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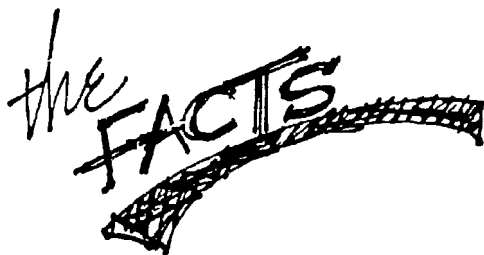
Cecelia Wambach

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We are a Teacher Education Program, jointly sponsored by San Francisco State University, San Francisco Unified School District and United Educators of San Francisco.

We have 54 Clinical Interns in 6 schools in San Francisco. These professional development schools are in many geographic areas of San Francisco, and offer our students challenging and wonderfully diverse classrooms in which to learn to teach. These schools are:

Alamo School
Alvarado School
Cabrillo School
Jose Ortega School
Marshall School and
Sir Francis Drake School

We are currently supported by San Francisco Foundation and AT&T

Our emphasis is on:

Learning to teach in a urban, diverse settings;

Teaching as a plan, action, improvisation, reflection process;

Classroom teachers as teacher educators;

Collaboration as a change agent for the university and the school;

Maximizing the learning potential for children in our schools;

Confronting ourselves as cultural beings, and learning what it means to teacher in multicultural settings where all are respected and celebrated;

Committment to change, learning on every level, and becoming an authentic community.



WHAT IS A CLINICAL SCHOOL?

A Clinical School is a community of learners. We learn, we reflect, and we validate one another.

Monthly meetings of clinical teachers, site administrators, and university professors provide a forum for collegial consultation and reflection. Case conferences are held when requested by a clinical teacher.

Clinical teachers engage in collaborative projects made possible by the contributions of the interns in the schools.

Continual informal exchanges occur throughout the day as teacher, interns, administrators, professors encounter one another in hallways, classrooms, lunchrooms.

Teachers, paraprofessionals, principals, interns, professors are colleagues. The relationship is no longer one of 'we-they' but 'we-us'. All are changed by the experience of collaborating.

Clinical teachers' observations, ideas, recommendations for revision of the teacher preparation curriculum are incorporated as consensus is reached.

Professors monitor their own behavior more closely to insure that the clinical teachers' perspective is sought out.

Clinical teachers participate in professional activity beyond the classroom and the school.

Paraprofessionals are encouraged to continue their education as interns in the Clinical Schools project.

Roles expand: Classroom teachers and principals are teacher educators and researchers. University professors become part of the school staff and make available to the school the resources of the university.

Professors share their research expertise with clinical teachers and conduct joint investigations.

Clinical teachers assume responsibility for the field work assessment of interns.

Professors link teachers with programs, places, staff at the university that contribute to the ongoing education of the children and of the faculty.

The whole school is the interns' classroom. The teacher facilitates the interns' early socialization to the profession.

Interns are assigned to a "home teacher" who suggests experiences in other classrooms that will contribute to the interns' professional development.

The principal participates in the socialization of the intern by sharing with the interns how a school works from the administrative perspective.

Interns participate in all school events from the beginning of training.

Interns are an essential part of the school: they make a contribution and maximize the instructional power for children.

Interns are incorporated into the clinical teacher's planning and become an integral part of the teaching team.

Interns learn classroom routines early in their training and assume teaching responsibility from the beginning. This allows the clinical teacher to develop special projects or activities that would otherwise be unfeasible.

Children participate consciously in teacher preparation and begin to value becoming an educator.

In a Clinical School children are made aware that their school helps prepare teachers. Their feedback is solicited and respected.

Discourse across Clinical Schools contributes to teachers' professional development, enriches the teacher preparation program for interns and provides a vehicle for school restructuring.

Cross-site visits by clinical teachers allows for sharing of mutual and complementary strengths and reduces isolation.

Dialogue among clinical teachers from different neighborhoods enriches multicultural understandings.

Inter-school exchanges creates synergy and stimulates innovations.

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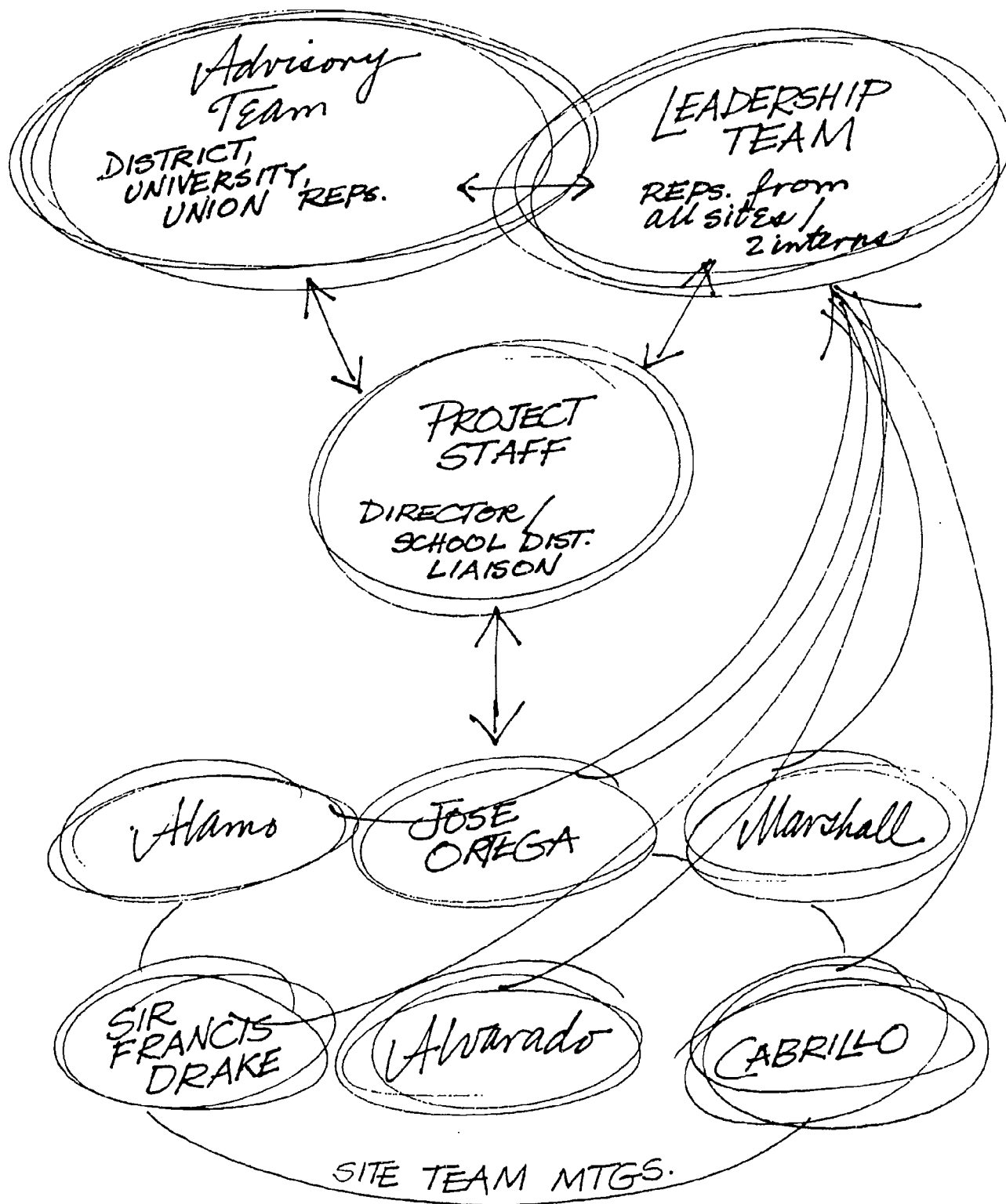
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Structure of our PROJECT



Clinical Schools idea network





San Francisco State University
1600 Holloway Avenue
San Francisco, California 94132

Department of Elementary Education
415/338-1562

CLINICAL SCHOOLS CALENDAR

SPRING SEMESTER 1992

SECOND SEMESTER INTERNSHIP:

First day of internship: Monday, February 3, 1992
First day of class: Tuesday, February 4, 1992
Internship: Monday, Tuesday, Wednesday mornings, and full days
on these Mondays: February 24, March 30, and April
27.
Mid semester week: March 23-27
Last day of internship: May 14, 1992

SITE TEAM MEETINGS:

Date should be planned to meet at your site (principal, lead teachers and university supervisor) once a month. Calendar should be prepared ahead of time, and be scheduled at a regular time.

INTERN SITE MEETINGS:

The university supervisor will schedule intern site team meetings (university supervisor, first semester interns, and student teaching interns) once a week. These should be scheduled during the time the first semester interns are in the school (Mon., Tues., Wed. mornings) and be held on site.

SPECIAL EVENT! Awards ceremony and end of year banquet. Thursday evening, May 21, 1992. Site to be announced.

LEADERSHIP TEAM MEETINGS:

Membership includes one principal and teacher from each school, two university supervisors, the director, and school district liaison.

Third Thursday of each month, SFSU, 3:30 TO 5:30

January 23 (fourth Thursday)

February 20

March 19

April 16

May 21

NOTE: If you are unable to attend one of the leadership team meetings, please designate a representative to attend in your place.

ADVISORY TEAM MEETINGS:

Membership includes the leadership team (above) and representatives from the school district, union, university and funding administrations.

Three times per year, 3:30 - 5:00

October 24

January 23 (cancelled)

April 30

NOTE: If you are unable to attend one of the advisory team meetings, please send a representative in your place.

"TOWN MEETINGS"

Open meetings for all staff/faculty of the Clinical Schools
Held once per semester.

November 7, 3:30-5:30 site t.b.a.

May 7, 3:30-5:30 site t.b.a.

PRINCIPALS' MEETINGS

These will be scheduled as needed, and will be held one hour before the regular principals' meeting at Cabrillo School. Either Hal Solin, Margaret Wells, Ruby Hong, or Cecelia Wambach will call these meetings.

CLINICAL SCHOOLS FACULTY

Executive Director: Associate Dean Vera Lane, SFSU

Project Director: Cecelia Wambach, SFSU

School District Liaison: Virginia Watkins, SFUSD

University Liaisons: Patricia Gallagher, SFSU
Nidia Gonzalez-Edfelt, SFSU
Lois Meyer, SFSU
Jane Bernard Powers, SFSU

School Site Teams:

Alamo School

Principal: Dorothy Quinones
Site Coordinator: Frances Zamlich
University Liaison: Jane Bernard Powers
Clinical Teachers: Frances Zamlich
Sharon Yow
Janice Low
Harriet Johnson
May Lee
Kristine Parker
Millie Hom
Abina Sullivan
Sophie Tom
Lynda Gibson
Margaret Ames

Alvarado School

Principal: Aurora Maramag
Site Coordinator: Shirley Dimapolis
University Liaison: Nidia Gonzalez-Edfelt
Clinical Teachers: Valeria Smyly
Carolyn Primus
Nancy Schlenke
Victoria Camp
Maryanne Blair
Tomas Todd
Lavetta Gardner

Cabrillo School

Principal: Carole Belle
Site Coordinator: Cheryl Lee
University Liaison: Virginia Watkins
Clinical Teachers: May Lui
Cheryl Lee
Kathy Kozuch
Alene Wheaton
Sandra Grist
Corinne Liljefelt

Sir Francis Drake School

Principal: Bonnie Bergum
Site Coordinator: Roland Horn
University Liaison: Cecelia Wambach
Clinical Teachers: Jim Lowe
Linda Elliot
Roland Horn
Deborah Ruskay
Claire Andreatta
Pamela Fenech
Judy Lujan
Gina Andreatta
Genese Washington
Kathy Thibadeau
Anna Smathes

Marshall School

Principal: Dolores Nice
Site Coordinator: Lizzie Jeremi
University Liaison: Lois Meyer
Clinical Teachers: Diane Doe
Flora Ruegg
Noreen Tierney
Clara Alip
Lizzie Jeremi

Jose Ortega School

Principal: Debbie Sims
Site Coordinator: Jane Beringer
University Liaison: Patricia Gallagher
Clinical Teachers: Anita Miller
Michelle Ashe
Gaye Gardner-Burk
Erin Keller Lynch
Lynne Rochette
Kathy Lund
Cora Hall

Advisory Faculty:

San Francisco State University

Dean Henrietta Schwartz, Dean of School of Education
James Brown, Chair of Department of Elementary Education
Gilda Bloom, Director of the Minority Teacher Scholarship Fund
Jack Fraenkel, Director of the Educational Research Center

San Francisco Unified School District

Ramon Cortines, Superintendent of Schools
Linda Davis, Deputy Superintendent of Schools
Hal Solin, Assistant Superintendent of Elementary Schools
Helen Hatcher, Director of Professional Development

United Educators of San Francisco

Joan-Marie Shelley, President, United Educators of San Francisco
Judy Dellamonica, Executive Vice President, UESF
Tom Ruiz, Director of Restructuring
Rudy Faltas, Director of the Paraprofessional Career Program

Foundations

Sylvia Yee, San Francisco Foundation
Kathy Orum, AT&T



The Clinical Schools Project

We are looking for prospective teachers interested in the challenges and opportunities involved in urban teaching. If you are one of these persons, join us in an experimental program, the Clinical Schools Project.

If you are selected as a Clinical Schools Intern, you will:

- A) Join a group of 30 other teacher candidates who participate in a new three semester program;
- B) Become an intern in the Clinical Schools Network in San Francisco. These schools are:
 - A. Alamo School
 - B. Alvarado School
 - C. Cabrillo School
 - D. Sir Francis Drake School
 - E. Marshall School
 - F. Jose Ortega School
- C) Earn your credential while you are actively participating in the life and culture of a school in the San Francisco Unified School District.

The Program:

First Semester, Fall '92

The Child in the Urban Setting

Math, Science and Technology in the Elementary School

Second Semester, Spring '93

Reading, Language Arts and Social Studies in the Elementary School

Teaching in a Culturally and Linguistically Diverse Classroom

"We are a community of learners Each of us is the pupil of whichever one of us can best teach what each of us needs to learn."

*Maria Isabel Berreno
Portuguese Post, Writer, Educator*

Third Semester, Fall '93

Student Teaching

Seminar

Mainstreaming (may be taken any semester or intersession)

Some special features of the program include:

- A) Some on site (elementary school classroom) university classes;
- B) Elementary school teacher participation in university classes;
- C) Integrated coursework;
- D) Experience working in multicultural settings and with children of limited English ability;
- E) Emphasis on self reflection and program tailored to meet your individual needs;
- F) Dedicated team of professors and teachers interested in the realities of urban education.

Note: In order to participate in the Clinical Schools Project, you must be a day student. There will be no evening classes offered. We will contact you for an information meeting in May and interview you during June or July. If you are selected, you must be available to attend an all day meeting with participating teachers, principals and professors the Friday before the Fall semester begins.

If you would like more information, return the following sheet to:

Dr. Cecelia Wambach
Director of Clinical School
San Francisco State University
1600 Holloway Avenue
Burk Hall, room 144
San Francisco, CA 94132

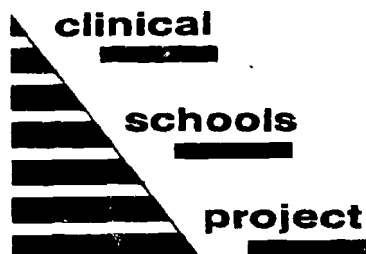
Yes! I am interested in hearing more about the Clinical Schools Internship.

Name_____

Address_____ Phone_____

Undergraduate degree_____

Undergraduate institution_____



CLINICAL SCHOOLS PROJECT

School of Education
San Francisco State University, Burk Hall 215
Telephone (415) 338-1031

SUMMER INSTITUTE AGENDA

DAY ONE: AUGUST 20, 1990
Seven Hills Conference Center
San Francisco State University

- 9:00 Coffee and Rolls
- 9:30 Welcomes Galore, from...
The Schools: Rosendo Marin, Principal at Marshall
Anita Miller, Teacher at Jose Ortega
- The University: Dean Henrietta Schwartz
Associate Dean, Fannie Preston
Nidia Gonzalez-Edfelt, Supervisor
- The District: Linda Davis,
Deputy Superintendent, SFUSD
- 10:00 Getting to know you: Who are we?
Preparation of a personal culture wheel
- 10:15 Plans and Expectations: The Agenda
Virginia Watkins, Liaison
- 10:30 Theme for Day One: The University
What should an ideal Teacher Education Program
be in the 1990's?
Cecelia Wambach, Director
a) Introduction
b) Exercise
c) The Clinical Schools Program
d) Reflection and Comparison
- 12:00 Catered luncheon of Salads Supreme by the
Seven Hills Catering Service
- 1:00 Semester One: The Clinical Schools Program
Pat Gallagher, Supervisor, Jose Ortega
Lois Meyer, Supervisor, Marshall
Nidia Gonzalez-Edfelt, Supervisor, Alvarado

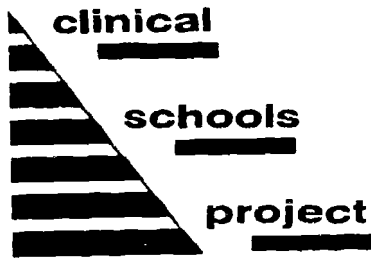
San Francisco Unified School District
San Francisco Federation of Teachers
San Francisco State University

2:15 Projects and Task Forces

Minority Recruitment, Virginia Watkins
Teachers as Researchers, Pat Gallagher

Clinical Curriculum and Program Projects,
Cecelia Wambach

2:45 Closing Remarks and Evaluation



CLINICAL SCHOOLS PROJECT

School of Education
San Francisco State University, Burk Hall 215
Telephone (415) 338-1031

SUMMER INSTITUTE AGENDA

DAY TWO: AUGUST 21, 1990
Burk Hall, Rooms 115, 134, 141
San Francisco State University

9:00 Coffee and Rolls, Hallway outside 134

9:30 Welcome to Day Two!
Theme: The Clinical School

Welcomes from:
Lois Meyer, Supervisor, Marshall School
Frances Zamlich, Teacher, Alamo School

9:45 The Clinical School: What should it be?
a) Interactive visualization:
Valerie Smyley, Alvarado School
b) Reflection (Think, Pair, Share)
c) Site group inquiry: How does our "ideal"
clinical school contrast with our school?

10:00 The Clinical Classroom: Some personal accounts
from selected teachers and interns:
Chair: Lizzie Jeremy, Marshall School

- a) Erin Keller, Jose Ortega School
Theme: Working as a team with your intern
- b) Linda Elliot, Sir Francis Drake School
Theme: Developing your intern
- c) Kristine Parker, Alamo School
Theme: Confronting problems with your intern
- d) Lisa Monroe, Intern Fall '89
Jose Ortega and Cabrillo Schools
The highs and lows of internship

Brainstorming and sharing session. The three
themes identified above have emerged as important
issues for Clinical Teachers. Can we as a group
come up with ideas to share? We will brainstorm
each theme after all of the panelists have spoken.

San Francisco Unified School District
San Francisco Federation of Teachers
San Francisco State University

- 11:00 The Clinical School: Initiating a Site Plan
Jane Bernard Powers, Supervisor, Alamo School
- 12:00 Lunch, Catered by Cleopatra's MidEastern Deli
Chicken, t. bouli, humus, meat pies, dolmas
- 1:00 Speaker: Claudine Fletcher
Topic: Taking care of myself: prerequisite to
team building
- Introduction: Nancy Aoki, District program
facilitator, Clinical Schools
- 2:30 Response: Carolyn Primus, Alvarado School
- 2:35 Announcements: Cecelia Wambach,
Supervisor, Sir Francis Drake School

INTERACTIVE VISUALIZATION

Listen as the visualization is read to you. Remember to make the scene as idelistic and positive as possible. We want the best for your son or daughter, niece or nephew at this setting.

Relax, as Valerie reads to you. Take the time to imagine the setting and the feelings.

THINK: Take a minute to contrast the "ideal" clinical school, with your school. What changes could be made to insure maximum participation from your intern? Write these here.

PAIR: Now share your thoughts with one other person at your table.

SHARE: Open the conversation up to everyone at your table. Next, share one of your contrasts with the entire group.

EVERYONE ON CENTER STAGE:
EFFORTS TOWARD EFFECTIVE COLLABORATION
IN THE CLINICAL SCHOOLS PROJECT
SAN FRANCISCO STATE UNIVERSITY



A presentation for the
American Association of Colleges of Teacher Education

March 1, 1991

Cecelia Wambach, Ph.D.
San Francisco State University
1600 Holloway Avenue
San Francisco, California 94112
(415) 338-1555

DRAFT ONLY

EVERYONE ON CENTER STAGE:
EFFORTS TOWARD EFFECTIVE COLLABORATION
IN THE CLINICAL SCHOOLS PROJECT
SAN FRANCISCO STATE UNIVERSITY

INTRODUCTION

The term "collaboration" should be inducted into the Guinness Book of World Records as the most widely used word in our current educational literature. Accounts of collaboration between teachers and researchers, families and schools, and universities and school districts abound (Coleman, 1987; Soule, 1988; Simontacchi, 1988; Clift, Veal, Johnson and Holland, 1990). Efforts to work together to create new educational programs, though laudatory, are not especially collaborative. Whitford et al. (1987) identified three types of collaboration: 1) Cooperative projects which are short term, and are usually characterized by one party instructing another; 2) Symbiotic collaboration, which is fuller, and involves an organizational alliance and reciprocity, and 3) Organic collaboration, which has a jointly owned issue as its focus and provides for the common development of all parties. The Clinical Schools Project, a joint effort in teacher education between The San Francisco Unified School District, The San Francisco United Educators, and the San Francisco State University, seeks to become both symbiotic and organic in its collaboration. We define collaboration as a mutual teaching and learning endeavor, where equal partners share a common vision and work toward a mutual goal.

But the questions "How do we collaborate, really? How do we reach the goal of collaboration? are important ones. We cannot simply call ourselves collaborative because we want to be. We cannot simply wish collaboration into existence; it will not happen by edict or instantaneously. This article looks at the efforts of the

Clinical Schools Project in its quest for a truly collaborative Teacher Education Program, one which combines the best aspects of the university and the elementary school classroom in the creation of dynamic, successful, and reflective new teachers for the urban schools.

When two separate agencies determine to collaborate, a relationship is formed, and like a relationship, there are highs and lows. Some of the highs are heightened learning experiences, successful communications, a new level of collegiality, and programs that are flowing smoothly. Some of the lows are the tensions caused by imbalance of power, different styles, varying points of view, and lack of communication. The Clinical Schools Project has just finished its first year and usually after a first successful year of a project, the findings and models are published in an educational journal for other institutes to replicate. Our project is different. After a year of painstaking efforts to collaborate, we realize that we have entered into a relationship which has many stages, and we are only at the beginning. We realize the need to confront our dilemmas, to recognize our lack of parity, to listen more carefully to one another and to modify our structure. We further acknowledge our strength and vision in honestly presenting our findings to the educational community. This article will be organized into three parts: the narrative, the dilemmas, and the restructuring.

THE NARRATIVE

The Clinical Schools Project is a collaborative teacher education project between three agencies: a university, the teachers' union, and the school district. The seed for the project was planted in 1985, when five professors came together with the idea to create an internship program with the local school district. They began by placing student teachers in a select number of schools where the teachers would be given some initial training in Clinical

Supervision techniques. This initial bonding between the university and the schools was strengthened in 1988, when a planning grant enabled this group to formally propose a joint teacher education program between San Francisco State University, San Francisco Unified School District, and the San Francisco United Teachers Association.

As a result of a year spent in planning, and a process of selection, six schools were identified to participate in this effort. Some of the criteria for selection of school sites included: a) ethnically diverse student populations which reflected the composition of the San Francisco population; b) schools which embodied the complexities of urban issues, problems, and opportunities; c) varieties of teaching skills and styles; d) supportive leadership style of the principal; e) willingness to reflect upon one's teaching and curriculum and make necessary changes; and f) dedication to the education of new teachers. The schools chosen represented diverse neighborhoods, school styles, social classes, and philosophies.

An organization chart was developed to show the structure of the project. (See figure one) The plan called for three instructional teams encompassing the six schools, and a project staff composed of a director from the university, and liaisons from all of the agencies. A larger coordinating council was to address the overall project goals, professional development, curriculum concerns, and other related issues. Roles of key persons were delineated.

A restructured teacher education program was developed by the Curriculum Committee of the Clinical Schools Planning Team, whose composition was teachers, principals, and professors. This group determined that the existing teacher education program did not adequately prepare new teachers to meet the demands of the cultural, linguistic, ethnic and class diversity in our urban schools. Emphases of the new program include: a) a rigorous,

integrated core of content courses; b) site based internship in an urban elementary school; c) participation by classroom teachers in the university courses and seminars; d) focus on the opportunities and challenges of the urban school, including linguistic, cultural and ethnic diversity; and e) a format of plan, action, reflection, analysis, to foster creative thinking.

The first goal of the Clinical Schools Project embodies the vision: The Clinical Schools Project will create a collaborative teaching and learning environment for students, clinical teachers, university professors, prospective teacher (interns) and administrators in six elementary schools. Other goals include creating a new teacher education program jointly developed by classroom teachers, recruiting students of color into the program, and empowering classroom teachers by including them as equal partners in teacher education.

SAN FRANCISCO CLINICAL SCHOOLS PROJECT PROPOSED ORGANIZATION

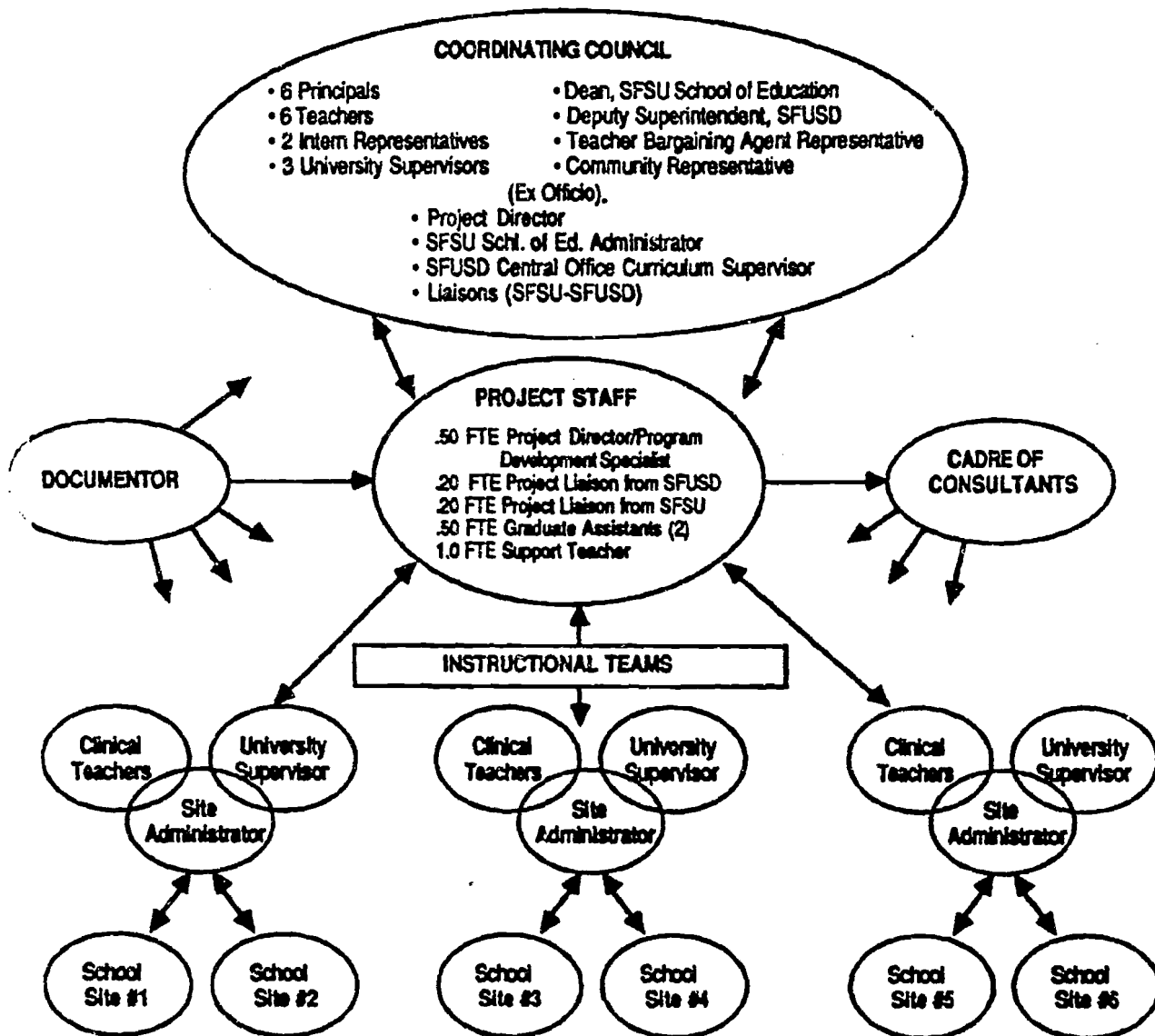


FIGURE ONE: A Model of the Clinical Schools Project Organizational Scheme.

Our project began with everything in place except for the new program which had to be refined according to California state standards. The university, teachers' union, and schools had worked together to formulate a design for effective teacher preparation. Twenty four dedicated and exemplary interns were chosen to begin an experimental phase of the project. Although funding had been concluded, principals and teachers determined to follow through with the plan to educate new teachers together. The project began on strong footing. The enthusiasm and excellence of the interns, who had been selected because of their scholarship and dedication to urban schools, was appreciated by the classroom teachers. They quickly resumed the positions of co-teachers in many of the schools.

THE DILEMMAS

Many of the problems that emerged during the first year evidenced initially as dilemmas. These dilemmas, although they created tension, provided the groundwork for the restructuring of the project. We will name these dilemmas first as statements, then consider each separately.

Dilemma One: School culture v.s. the university culture: How can differences in power, expectations and time be resolved?

Dilemma Two: Organization v.s. chaos: Can a beginning project find the balance between these critical elements, so that the vision and ideas can develop?

Dilemma Three: Uniformity v.s. individuality: Can a strong collaborative project develop among schools with diverse styles?

Dilemma Four: Collaboration as an attitude v.s. collaboration as a structure: Can trust, collegiality, and mutual respect be outcomes of collaborative efforts? (Not addressed at AACTE)

Dilemma One

School culture v.s. the university culture: When two different cultures meet for the first time, it is impossible to join forces collaboratively, at least at the outset. In the Clinical Schools Project, culture clash was felt around issues of power, time, and expectations. Tirkunoff, et. al., 1979, page 10, states that collaborative work requires an assumption of parity.

Collaboration recognizes and utilizes the unique insights and skills provided by each participant, while, at the same time, demanding that no set of responsibilities is assigned a superior status.

From the beginning the school culture expected the university to have the power, and to make the decisions. Teachers wanted clear delineation about how and what they should do with the interns. It felt unsteady to them that the rules were developing, that the project was in process, and that we were learning together. Many of the teachers suspected that the university did not know what they wanted. This was actually half true. We knew we wanted what would work best, and what would develop during our close relationship with schools. We knew we wanted a teacher education program that would produce teachers who were reflective decision makers. Reminders that this was an experiment were helpful to all participants. Gradually trust began to build around the idea that we would learn together.

One strategy for bonding was the newsletter, the Memo, which facilitated communication and provided a sense of community within the six schools. Reports of what was happening in each of the six sites, and ideas that were working, appeared in the Memo. The idea that six very diverse schools were working together to educate new teachers carried great meaning. A sense that we were building a direction was beginning to form.

It has been well documented in the literature that time is the most

expensive commodity in a collaborative project. The RITE (Reflective Inquiry Teacher Education) Project at University of Houston (1985) cited time constraints of collaboration as the chief detriment to the successful operation of the project. Another collaborative effort SUPER (School University Partnership for Educational Renewal) from U.C. Berkeley (1988) noted that the high turnover of teachers involved in the project was the result of the amount of time required of the participants. Teachers from the Richmond Unified School District working with this project cited severe burnout from those willing to take the time to effectively work with new teachers and maintain their own classrooms as well (Simontacchi, 1988).

Tensions around time were paramount. These surfaced at the meetings conducted by the university liaisons in some of the sites. Most of the professors, however, recognized that despite the time constraints, university development of the project was out of the question. An effective change in teacher education required that we listen to the voices from the schools.

Teachers believe that their time is best spent preparing curricula for their classes. There is little time left over for meeting with the university liaisons about interns and teacher preparation or for meeting with interns. The ideas of collegiality, time to work together to make decisions about the program of preparation for the interns, and talking over the "kinks" in the project seemed frivolous. Teachers could not see that spending their limited time in this way would pay off, in respect to children's learning in their classrooms. It was easy to deal with the issue of spending time with interns. One of the responsibilities of the district liaison was to spend time in the classrooms of the clinical teacher so that the teachers and interns could meet. The district liaison was a woman of many talents. What she brought to the children were songs and stories from many cultures. One teacher reported that

"the children cheered when she appeared at the door" (Schlenke, 1991). She was not simply a "super-sub", who would babysit while the interns and the teachers talked. The teachers felt that their children were involved in a valuable learning experience while they planned with and involved themselves in the professional development of their interns. Trust was building.

Another way that we dealt with the constraints of time was to identify our sessions as meetings or conversations. Meetings require a tight agenda, decisions are made, and persons responsible for action taken delineated. Some discussion is permitted, but this is controlled by placing a time limit on the discussion. Conversations are different. They are about idea generation or problem solving. Some issues need mulling time, clarification, and deeper examination. If a time was denoted a conversation, participants would expect that one topic needed to be explored in depth. This simplistic but clear delineation was a help because all participants knew what to expect, and both parties (the university and the school) were better able to deal with the meetings.

Respecting and recognizing differences in time and expectations among school and university cultures was important. It took us the first year to do this. It was difficult to trust the process and to see it clearly while we were enmeshed in it. Style differences, tensions in inter-personal relationships, and power struggles within our own group of six professors and one district teacher did not help. Weekly formal and informal conversations among us, confronting the issues that arose, carried us through. Another help was the mentoring relationship between the director and associate dean, which persons on the team respected.

One turning point in the power issue occurred during the summer institute held after the first year. Teachers played a large role

in determining course content, and initiating workshop sessions which dealt with the interns in their schools. Some of the topics that they developed were: a) Aiding the intern in respecting and developing his/her own style; b) Confronting the intern with negative issues that arise; and c) Accommodating the intern within the framework of the school. Some teachers emerged as leaders within the project, and the idea that these six schools were involved in a serious effort to change the way teachers are educated took hold.

Dilemma Two

Organization v.s. chaos: The importance of balancing chaos and order in a beginning process has not adequately been addressed in the literature. The dilemma with which we have been dealing, the clash of cultures around time, power, and expectation carries with it a flood of chaos. The beginnings are not neatly ordered. There are no answers, and very few ways of being clear. Many of the structures are organized loosely, because they need room to continually change. The ordinary heirarchy of knowing what's happening--that sound communication vehicle--is not in place. Tensions, created when individual expectations are diverse, are rampant. Can this state be positive?

In his handbook for a management revolution, Thriving on Chaos, 1988, Tom Peters exhorts that chaos must be expected and respected. His enthusiasm for the creative process over the controlled process was a turning point for the director. That managers become leaders when they believe in the process, keep the vision alive, let the structure develop on its own, and give up the control so that each person is responsible for the success of the project are some of the chief tenets of this philosophy. Figure two shows this new view of leadership, followed by the summary of the diagram explicated by Peters:

The
Guiding
Premise

L-1 Master Paradox

The Three
Leadership
Tools for
Establishing
Direction

L-2: Develop an Inspiring Vision

L-3: Manage by Example

L-4: Practice Visible Management

Leading by
Empowering
People

L-5: Pay Attention! (More Listening)

L-6: Defer to the Front Line

L-7: Delegate

L-8: Pursue "Horizontal" Management
by Bashing Bureaucracy

The Bottom Line:
Leading as
Love of Change

L-9: Evaluate Everyone on His or Her
Love of Change

L-10: Create a Sense of Urgency

FIGURE TWO: A New view of leadership. Tom Peters,
Thriving on Chaos, 1988. Harper and Row, New York.

The dictionary defines "axiom" as "a statement universally accepted as true." Management, as it has been professionalized and systematized, has developed many axioms over the past century. But in the past twenty years, the stable conditions (large-scale mass production) that led to the slow emergence of these universals have blown apart. So now the chief job of the leader, at all levels, is to oversee the dismantling of dysfunctional old truths and to prepare people and organizations to deal with, to love, to develop affection for--change per se, as innovations are proposed, tested, rejected, modified and adopted.

This set of prescriptions (See figure two) begins with the Guiding Premise, L-1, that leaders must above all confront--and master--a series of paradoxes--that is, willingly embrace (test, learn about) across the board challenges to conventional wisdom.

Mastering the paradoxes and what they stand for (L-1) requires the Three Leadership Tools for Establishing Direction: L-2, developing and preaching a vision which clearly sets your direction, yet at the same time encourages initiatives from everyone to perfect and elaborate the challenge that vision lays out; L-3, channeling interest by living the vision via your calendar (what you do-and do not-spend time on), which is the single most effective tool for establishing faith in the vision amidst otherwise debilitating uncertainty; and L-4, practicing visible management for the purpose of preaching the message and enhancing the leader's understanding of the context where it counts--on the front line, where true implementation takes place.

The principal challenge is to empower people (everyone) to take new initiative--that is, risks (as they see it)--on a day to day basis, aimed at improving and eventually transforming every routine in the project. There are four enabling leadership prescriptions (Leading by Empowering People): L-5, on becoming a compulsive listener, since listening (especially to those in the field) remains the truest signal that "I take you seriously"; L-6, on cherishing the people in the field--demonstrated in a host of ways; L-7, on delegating "authority" in a way that truly empowers; and L-8, vigorous and visible pursuit of bureaucracy bashing.

The last two leadership prescription urge you to get directly on with the new "it": L-9 proposes that everyone be evaluated on the simple but revolutionary question: "What have you changed lately, and why?" L-10 suggests that leaders must epitomize change in every action in order to create an overwhelming sense of urgency throughout the project. While you can't do everything at once, no one prescription makes much sense in a vacuum.

Other guiding exhortations considered seriously by the director were Peter's emphases: Involving everyone in everything; The use of self-managing teams; Listen/Celebrate/Recognize; "Model"

innovation; Practice purposeful impatience; Believe that your vision demands revolution. Reading Peters and understanding the creative force of chaos was another turning point. Other colleagues, who were developing school change projects, were eager to involve themselves in conversations around this theme. Dr. Henry Levin of Stanford University, and Dr. Jane Stallings of Texas A and M gave me considerable direction at this time. Both were involved in projects that were well into their fifth year, and we discussed the stages that collaboration requires.

Embracing chaos was not easy for the school district, especially for the principals who were reaching for some order to balance the uncertainty. Actually we at the university were not embracing it either, just allowing it to be there and committing to the fact that we would not continue to make the decisions and sacrifice our vision because the project felt more organized when we did. The "guidebook", published in haste so that teachers could feel some sense of security was recalled to the university. Although its intent was to provide some guidelines, it was prematurely presented and did not truly reflect the vision of all participants.

Finding balance has been easier. Believing in chaos allows one to determine those issues which are of importance and to concentrate on them. The idea that everyone has something to contribute has been freeing. The belief that trusting the participants has helped to move the project participants into caring about the project, and to be changed by the project. The summer workshop, where the teachers shared their ideas about teacher preparation was validating for the project and for them. The persons who really know about teaching, the ones in the classrooms right now, must be our partners in creating the new teachers.

Dilemma Three:

Uniformity v.s. Individuality: There are six elementary schools in San Francisco who are collaborating as partners with the university

in establishing a new teacher education project. Each of the schools is unique, in terms of size, focus, geographic area, ethnic mix of students, and spirit/energy of staff and students. These schools were chosen because of their uniqueness, their interest in participating in teacher education, the leadership of the principal, and their commitment to working with the opportunities and problems that are a part of the urban environment.

Clift, Veal, et.al. 1989, cite five variables of importance when attempting to build a professional learning culture in schools. These are: a) leadership; b) physical structure of the school site; c) individuals; d) interpersonal relationships; and e) synergy. Of these, we have looked seriously at the differences in the schools in relationship to all of the above factors. The project has been most successful in those schools where the leadership supports the interns and is interested in the on-going continuance of the project because of how it is positively affecting the school environment. Teachers who have established a relationship of trust and collegiality among each other, and who talk regularly about the children and the curriculum, also are committed to the interns and their learning. Some schools value autonomy, and these are the most difficult with which to work. Nurturing collaboration norms in these environments and creating a positive emotional ethos has been essential. Because she is in every school each week, the district liaison is the person who is responsible for this support. Fortunately, she is keenly attuned to providing a positive focus and keeping the goals of the project alive. The substance of the project, then, demands uniformity. That all recognize that essentially, the commitment to a partnership in creating reflective teachers, is primary.

On the other hand, individuality of expression is desirable. Each school, because it has its own unique culture, has something different to offer to the intern. Problems arise, however, when schools see that the way the project works out in one school is

different from what happens in another school. For example, one of the principals took issue with the fact that her teachers had not been asked to present in any of the university classes. The fact is that the expertise that was requested in the university class dealt with working with limited English proficient children, and her staff had not been dealing successfully with this problem in their school. Another time, a principal noted that the interns were in teams in one school, and in another school they were placed individually in each classroom. These decisions about placements were made by the interns and the teachers, whose decisions were based on levels of confidence among the interns, and availability of teachers. It was important to determine that individuality among school sites was valid, if we were to have decisions made at the level where they would be actualized. Site decisionmaking seemed to be essential. We knew that the organizational structure would have to be changed, because joint decisionmaking was not always appropriate.

Dealing with dilemma three led us to see the importance of having a university liaison at each school site, who would be the colleague with whom the school staff would identify. This liaison would get to know the school and its culture, and would as much as possible, interact formally and informally as a part of the staff. Each liaison would determine the amount of time s(he) would spend at the school site, but a minimum of three hours per week was considered essential. This was a key turning point in the project, and the combination of dealing with all of the dilemmas led us to realize that a structure change in the organization of the project was essential to our well being.

RESTRUCTURING THE PROJECT

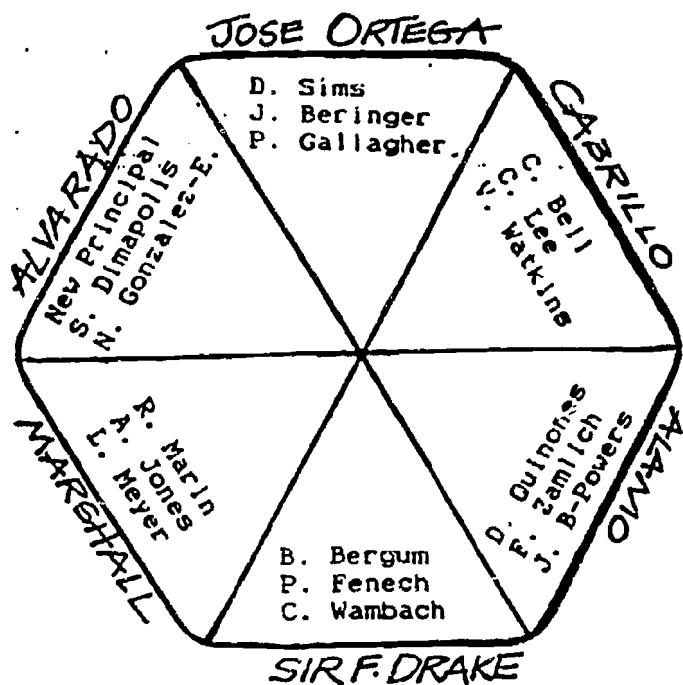
A look at figure one on page 5 shows the organization as it was first conceived. Many of the structures were ones that could not work. For example, when the coordinating council met, there were almost 30 people present, and it was impossible to talk about the

project and make decisions. Each participant had his/her own agenda, and very often the director abandoned the set agenda in favor of solving the urgent needs of the participants. These needs were oftentimes ones that could have been handled at the local level. We began to affectionately call this group the coordinating mob.

Another change that was mandatory was that there be a university liaison at each site, and that the site become the decision making body whenever possible. Power had obviously been with the university liaisons at their meetings, since so much time was devoted to conversations about the project. Even though these were valuable sessions, they interfered with the collaborative emphasis. We needed to have a way where teachers, principals, interns and the university liaisons could meet on their own turf. We saw that when teachers did not have to go out of their schools to attend meetings, and when the content of the meetings was focused on their site, they became more involved in the project.

The new organizational scheme has two levels of administration, rather than the one coordinating council (See figure three: Clinical Schools Organization). These are the advisory team, which consists of deans, funders, the union leadership, and the district administration. This team meets only once yearly. The decisionmaking body is the executive team. Members of this team are representatives from each site (either a principal, teachers, or university liaison), the director, and the district liaison. The task of this body is to make decisions that relate to keeping the vision of the project in place, to deal with thinking through and writing out various systems of the project as they emerge (for example, assessment of the interns at every stage of preparation), and to generate ideas regarding the future of the project.

In summary, we have learned that real collaboration, "symbiotic" collaboration, requires that the dilemmas that emerge be



THE CLINICAL SCHOOLS

SITE TEAM LEADERS:

Principal
Site Coordinator
University Supervisor

SITE INSTRUCTIONAL TEAMS:

Principal
Site Coordinator (Clinical Teacher)
University Supervisor
Clinical Teachers
Interns

THE EXECUTIVE TEAM is the decision making group. Participants are:

Two Principals
Two Site Coordinators
Two University Supervisors
Director and Assoc. Director
Liaisons

THE ADVISORY TEAM:

Funders
University/District/Union Administrators
Director and Associate Director
Liaisons

Figure Three: The new organizational structure of the Clinical Schools Project of San Francisco State University.

confronted. In the Clinical Schools Project of San Francisco State University, three of the dilemmas that emerged were: a) university culture v.s. school culture; b) organization v.s. chaos; and c) uniformity v.s. individuality. Allowing these to be present as an intricate part of the process and the conversation enabled both collaborative partners to understand one another and to change. Turning points along the way were signals that we were slowly succeeding. Described in this article as turning points were: a) a newsletter which facilitated bonding between the schools; b) collegiality between the university liaisons and their respective schools; c) the ability of the district liaison to establish an emotional ethos within the schools; d) delineating sessions as "meetings" or "conversations"; e) addressing the issue of differences in style among the university liaisons; f) recognizing the value of chaos, while maintaining some organization for stability; and g) placing a university liaison at each school site. The restructured project is now beginning the second semester, and the challenge of working with the research agenda that has emerged is upon us.

A CLINICAL SCHOOL EVOLVES

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Paper prepared for presentation as part of symposium, "Everyone on Center Stage: Efforts Toward Effective Collaboration in the Education of Teachers", at the annual meeting of the American Association of Colleges of Teacher Education, Atlanta, Georgia, February 27-March 3, 1991.

INTRODUCTION

The enactment of the collaboration between San Francisco State University and the San Francisco Unified School district has evolved slowly, over time, in the multiple interactions between participants. In order to understand how the evolution of the Clinical Schools Project has unfolded it is useful to look at how the actors at one site engaged in their new roles as partners in initial teacher education. At this point, midway into the second year, we are beginning to see some effects of our collaborative work. Each phase of the Project has presented problems and opportunities which have informed subsequent phases. This paper attempts to illuminate the salient features of these phases and address the concerns that attend the current phase from the perspective of the university facilitator, classroom teachers, and site administrator.

SCHOOL PROFILE

Jose Ortega Elementary School is located high on a hill in the Oceanview-Ingleside district of San Francisco. The long white stucco building, built in 1952 and remodeled in 1962 commands a view of the Pacific Ocean and of the neighborhoods to the south and west. The neighborhood immediately surrounding the school is comprised of tidy single family homes. The population of the mostly working class neighborhood is ethnically diverse. The school population reflects this diversity: 41% Black, 14% Other White, 11% Filipino, approximately 9% each Spanish surname, Chinese, and Other Non White, with the remainder distributed among Korean and Japanese.

Jose Ortega is a relatively small school with just under 400 students. In addition to the regular Kindergarten - fifth grade program the school supports a special education program for approximately 40 students. During the after school hours the Jose Ortega site is used by the YMCA for its after-school program. And on weekends the building is a site for the San Francisco Unified School District "Saturday School".

An Ethos of Care

The children at Jose Ortega like to come to school. Although nearly 1/2 of the students are classified as Educationally Disadvantaged Youth the attendance rate is over 95%. This high rate of attendance is understandable when one walks through the doors and begins to engage students and teachers. The ethos of Jose Ortega school is communicated through the continuing care teachers and staff take with children, their families and each other. There is a strong collegiality among the staff and great warmth and humor in their interactions. The teachers and children are supported by a Program Resource Teacher, an Elementary Advisor, a number of paraprofessionals, and community volunteers. Primary language support is offered to children and families whose first language is other than English.

The staff at Jose Ortega is committed to ongoing professional growth. One fourth of the staff have advanced degrees and all of the teachers have had special training in a number of curriculum and instruction areas. The instructional program at Jose Ortega is enhanced by the contributions of visual and performance artists, field trips and camping excursions for students, and by the special resources acquired through many teacher-requested grants from local foundations.

Becoming a Clinical School

In the Spring of 1989 the faculty at Jose Ortega Elementary School applied for participation in the Clinical Schools Project. The Principal felt that the time was optimal for the teachers to become more deeply involved in teacher education. Many teachers had hosted teacher education students in their classrooms. A norm of collegiality was developing among the faculty and teachers had begun reflecting informally on the nature of their work and how one learns to teach. The Principal believed that the opportunity to collaborate with the university in a concerted effort to improve the preparation of teachers for urban schools would serve several important purposes. First, it would validate the teachers at Jose Ortega for the work they were already doing. Second, it would provide time and a forum for professional conversation among the teachers; time, the Principal felt, that is not

commonly accorded teachers in the course of their work. And, third, she believed that the deeper, collaborative reflection on their craft and the imparting of that knowledge to novices would strengthen the quality of their own work with children.

It is interesting to note that when the Principal first proposed the notion of the teachers becoming "clinical" teachers the faculty looked at each other and identified the strengths they perceived in their colleagues, not in themselves. This collegial validation served a supportive function in the decision of several teachers to participate. [Such celebrating of other teachers' accomplishments continues as a salient feature of the Jose Ortega teachers' talk today.]

PHASE I: STUDENT TEACHERS

In September of 1989, at the first faculty meeting of the year, The Principal and the university facilitator introduced the four interns to the staff. The Principal explained that [as a consequence of participation in the Clinical Schools Project] the "traditional method of student teacher, master teacher, and four walls, was no longer". The interns were to consider their identified clinical teacher's classroom as a "home base"; the faculty were "all sharing in the responsibility" for training. This re-visioning had been accomplished by the planning group of teachers, principals and university faculty over the course of the previous year. The Jose Ortega faculty had considered this new vision when they agreed to participate. The principal's reiteration was a way to reinforce their commitment.

Early Socialization: Semester I

At a meeting of the interns following the faculty meeting the interns expressed their appreciation of the welcome they received from the staff. They had been included in this initial staff meeting as a way to contribute to their professional socialization. Having just completed a series of courses focused on curriculum the interns had not yet experienced participation in the wider life of a school. It had been the intention of the Clinical Schools Project planning group and of the staff at

Jose Ortega to facilitate this early socialization. Attendance at the faculty meeting during which the Principal "walked through" the school rules and procedures for the benefit of all the teachers was thought to be one way to begin to give interns a sense of the "big picture" of school life.

Staff meetings help develop the "insiders'" perspective. In this relatively formal setting indications of the relationship between the principal and teachers may reveal themselves. The salient concerns of the faculty surface. Following the meeting the interns were asked by the university facilitator what had surprised them. D_____ had been "overwhelmed by the amount of paperwork that teachers have to go through". S_____ was surprised at how calm the teachers were and at the amount of professional activity that had gone on during the summer, when school wasn't in session. M_____ had put herself in the place of a first year teacher listening to all the instructions and imagined how she would have responded; how she would have planned. She was impressed at how fresh and vital the teachers seemed; how "ready to go". K_____ said he didn't feel intimidated by the professional level of interaction. He felt "really welcome"; that the clinical teachers really "knew their stuff". He had to keep reminding himself that he was new, that he wouldn't be expected to know it all now. But he kept wondering, as the meeting progressed, what kind of ideas he would come up with to contribute to the ongoing life of the school.

During the faculty meeting the principal had asked teachers to think about having the children prepare a bulletin board in the hallway with the theme, "Peace". The interns volunteered, suggesting that they could plan and design it together and each take responsibility for working with their own classes to produce something to contribute to the board. The product was to be seen as the culmination of lessons devoted to reinforcing the "peace" concept. The principal was delighted at the interns having taken the initiative. That contribution later proved to have been critical to the establishment of a bond between the interns and the staff. It gave them some visibility school-wide and allowed the interns an opportunity to give something to the school in exchange for their receiving continual assistance

throughout the semester. It also allowed them to get to know the children very quickly. Later, as classes of children passed by the "Peace" bulletin board on their way down the hall they were able to point out to their classmates their own contributions.

The reflections of the interns at this early stage give some indication of their beginning to try out the role of classroom teacher and colleague. Taking the perspective of a new teacher, as M_____ did, or of an experienced teacher, as K_____ began to do, stretched the interns. D_____ 's surprise at the paper work that attends the role of classroom teacher pushed her to consider the wider context in which she would work. This was an introduction to the expanded role dimensions of classroom teacher. The interns felt included; that they were fortunate to have been able to start their full-time student teaching in such a professional way.

Early Socialization: Semester II

In contrast to the Fall semester interns the group of Clinical Schools Interns who came to student teach at Jose Ortega during the following Spring were socialized quite differently. By late January the school year was well underway. The children had already formed relationships with their teachers, and with the first interns. There was no opportunity for the interns to get the overview provided by the initial faculty meeting in September. It was more difficult for the teachers to "back up" and provide the "big picture" perspective. The pace of activities made it more difficult for clinical teachers to meet the interns' early needs for belonging. While the first semester interns had been present at the unfolding of the school year, the second semester interns had to, in some respects, run to catch up.

Several times during the second semester the teachers commented on how different the second group was from the first. And each time the teachers admitted that they had felt a special connection to the interns with whom they had initiated both the Clinical Schools Project and the school year. It might be speculated that the arrival of the second group of interns coincided with a natural "slump" that occurs during the process of implementation of innovative practices.

J____, the Program Resource Teacher, speculated at the end of the Spring semester that the second group focused much more on the classroom and less on the school as a whole. There was much less movement of the interns in and out of other teachers' classrooms. She added that the factor of time was critical. When interns start in September they have more time to get to know the school. She acknowledged that the Spring interns did get a bit more connected when they attended an all-day staff development meeting on learning styles at the site. Like the Fall faculty meeting, the staff development activity made the interns feel more like "insiders".

However, throughout the semester the second group of interns continued to display a less collegial stance than had the first semester group. Evidence was seen in the interns' desire to have their regular meeting with the university liaison in the school library rather than in the teachers' lunchroom, as the first group had done. They reported that in the more public environment of the lunchroom they felt sensitive to scrutiny and to criticism. This is a clear indication of a very different conception of their place in the school community. They had little interaction with other members of the staff and, as the principal noted, also were less involved with each other than the first semester interns had been.

Accounting for Differences in Early Socialization

In attempting to understand the difference it was pointed out by one teacher that the interactional styles of the Clinical Teachers for the first semester were quite different from those who worked with the first group of interns. Three of the teachers did not themselves spend much time in the lunchroom nor in informal interaction with the rest of the staff. They tended to remain in their classrooms during the recess periods and, in one case, eat lunch in her classroom. This latter teacher explained that she did so, not to be unsociable but to give herself time to plan and organize well for the afternoon period. While all of the teachers were friendly and personable several tended to isolate themselves more from collegial interaction than the teachers who worked with interns in the Fall. It is quite

possible that the interns took their cues from the teacher and modelled their own professional behavior accordingly.

It is not yet clear that any one factor can be identified as more significant than others in impeding the second semester interns' socialization into professional collegiality. Certainly personality, temperament, and the interns' own biographies contributed. However, the fact of the difference in the school community in January as opposed to September; the lack of an opportunity to contribute to a unifying project; the modelling of their Clinical Teachers; and the tendency in the implementation of an innovation for enthusiasm to wane after the early rush, all combined to create a kind of regression to a more typical, isolated mode of student teaching.

At the same time that the full-time student teachers began their work at Jose Ortega a group of four students in their second semester of coursework was invited to do their field work at the school. These students spent two mornings per week at the site during the reading-language arts period. They were placed in the classrooms of teachers who were not working with full time student teaching interns. Two of the clinical teachers were in their second year of teaching and it was their first experience in a teacher education role. Their insight and observations were very acute. As they explained it themselves they were so newly removed from the university setting they were able to remember what the experience demanded. And they were able to articulate their knowledge, so newly acquired, to the students in a way that they understood.

The level of activity at Jose Ortega during that first year was high. The influx of teachers-in-training and the demands of the more intense focused way of working with both students and university personnel was at once stimulating and exhausting. Regular meetings with the university liaison, attendance at meetings of the Clinical Schools Project teachers off campus, countless informal interactions with other teachers, the university liaison, the interns themselves produced a rich dialogue. Throughout the duration of the first year there was continual questioning, continual reflection on what we were trying to accomplish and how it

might best be done. The presence on site of the university liaison one or two days a week was a constant reminder of the school's participation in the wider teacher education effort. When problems arose in the course of the semester, particularly those concerning the best way to proceed with the interns, the Clinical Teachers provided each other with support in the form of advice, a listening ear, an offer of direct intervention. Over time that interaction formed collegial bonds between teachers who, as one teacher observed, might not otherwise have had much contact. [In a more traditional student teaching arrangement it is possible for teachers to work with a student teacher and for the rest of the staff not to know that it has occurred.]

At the end of the first year of involvement in teacher education as a schoolwide enterprise 8 of the 11 teachers at Jose Ortega had worked directly with an intern at one time or another. Two of the other three teachers had opted not to work with interns, but supported the school's involvement. The third teacher was a first year teacher. All of the teachers believed that they had learned from the experience. One teacher, who had worked with the part-time students felt enormous responsibility for the student who worked with her. She appreciated the value and power of the field work experience and wished it to be meaningful for the student. She spent a great deal of time actively intervening in the student's practice to point out what worked and to make observations as to what could be improved. She communicated continually with the instructor [who was the Project university liaison] urging all instructors, for example, to insist that their students have directed experiences with a whole class of children before student teaching. She had noticed a tendency in some students [recalled from her own days as a teacher-in-training] to opt for an observational stance when they were confronted with classroom realities. This give and take was characteristic of that first year and extended into the university classroom where the Clinical Teachers gave presentations to the students-in-training.

Having established a rapport and working relationship with the teachers at Jose Ortega School the Clinical Schools Project revised teacher education curriculum was now ready for implementation.

PHASE II: CLINICAL SCHOOLS PROJECT INTERNS

In September, of 1990 the first cohort of teacher education students who would go through the entire three semesters of preparation together entered the Program. After a formal application and interview process twenty four students were selected to participate as Clinical Schools interns. Four interns were assigned to Jose Ortega and spent three mornings a week at the school as part of their coursework. Their work focused on the child in the urban school and the teaching of reading, language arts and social studies.

Unlike students in San Francisco State's regular teacher education program the interns in the Clinical Schools are supervised by the university supervisors during their early field work. It was agreed that only by such close monitoring of the activity of the interns and continual interaction with the clinical teachers could we build a program of preparation and socialization to the profession that was responsive to the needs and demands of urban schools. In addition, the Clinical Teachers helped to design the activities that the interns engaged in during the semester and participated in the teaching of curriculum courses at the university.

NEW ROLES AND EXPECTATIONS

Throughout the duration of our association we have struggled to accomodate the demands that accompany a new set of role expectations. It is no longer possible for either partner to remain entirely aloof from the other. As several teachers pointed out, the presence of the supervisor on site for a full day each week, at the monthly meetings of the Clinical Teachers, and at other times as necessary serves as a continual reminder to the teachers of their university partnership. As a result the clinical teachers have experienced a heightened sense of responsibility to the interns, to the university, and to each other. "You search inside yourself to see what you're doing and why, and why it works - or if it doesn't." [E____, 1-31-91] In contrast to their previous experiences with students in their first semester of training CSP teachers are beginning to look at the preparation of teachers in a

broader professional context. At Jose Ortega teachers see themselves as models for the interns, as consultants to their school colleagues, and as colleagues of the university instructors.

Clinical Teachers as Role Models

Several teachers have acknowledged that because of the continual university presence they have a keener interest in the success of the interns at the early stages of their training. They report that they are putting more effort into and paying more attention to what they do as they model for the interns. And they are increasingly more aware of the effect this has on their teaching of children. One teacher contrasted this awareness stance with that of some teachers who she said "...go on automatic pilot" [when they have a student teachers] and let the student do their university-generated assignments without dialogue and reflection. Another teacher, aware that the classroom environment reflects her own professional stance and personal taste, came in an hour early on the morning a new intern arrived to insure that the classroom was ready to receive a new guest. There had been a substitute teacher in the classroom the previous day and it was important that the teacher feel ready to be "present" for the intern when she arrived. While this decision may reflect this particular teacher's style it is illustrative of the kind of increased attention to the modeling role prevalent among the teachers at Jose Ortega.

Clinical Teachers as Colleague Consultants

It is this dimension of their role that the clinical teachers acknowledge as both new and satisfying. The cellular structure of schools and the relative isolation of teachers from one another militate against easy interactions between members of a school faculty. At Jose Ortega collegiality was growing in the year before the Clinical Schools Project. Teachers encountered one another frequently. They socialized at lunch time and the conversation was notably free of the kind of complaining that one so often hears among "off duty" teachers. There was a

willingness to exchange ideas and to offer support to each other. There was a sense of "we-ness" vis a vis the children, a spirit of community.

With their involvement in the Clinical Schools Project the teachers who worked with interns found themselves in more frequent contact with their colleagues, particularly with faculty members who they might not otherwise have consulted with. Several factors account for the heightened interaction. The first is the presence of a cohort of interns to whom the Clinical Teachers have communally committed their time and attention. As E_____ a 5th grade teacher, observed: "I feel like I'm better serving the student [intern] because it's more of a joint effort . . . It's not just me and the student [intern]. It's G_____ and A_____ and L_____ and C_____ and K_____ [clinical teachers] and D_____ [the principal] and I and the student [intern]. I don't feel isolated."

This shared responsibility was very much in evidence early in the Fall 1990 semester when an intern in one of the classrooms was observed by the teacher to be resisting her guidance. The situation required a great deal of tact and yet called also for direct and assertive action on the part of the clinical teacher. After two weeks of a progressively dysfunctional relationship between the teacher and the intern it was determined that the intern would be better served by being reassigned to another clinical school. Coming to that decision was the result of multiple conversations between the teacher and her clinical teacher colleagues and principal. Central to the teachers' concerns were the preservation of the dignity of all parties as well as fidelity to their commitment to the enhancement of the profession. Insuring that teachers-in-training were sensitive to the social and cultural dimensions of their work in the school community was paramount among their concerns. The clinical teachers offered support in the form of listening, reflective feedback, stories of similar challenges in their own work, and reference to their charge as clinical teachers to support the personal and professional, as well as pedagogical, development of the interns. The decision for the intern to move was consensual. And while the clinical teacher felt disappointed she was grateful that it had not been her decision alone.

The collegial consultation was not limited to problems however. The revision of the university teacher preparation courses emphasized the integration of the curriculum. The work of the first semester interns centered on the teaching of reading-language arts and social studies. In order to model the ways in which literature, writing, and social studies themes and issues might be interwoven two of the clinical teachers began to engage in cooperative thinking and planning. They met regularly each Thursday afternoon to jointly construct an approach to integrated teaching that also accounted for the differing levels of competence in reading of their fifth grade students. This represents a shift from the more typical situation where there is little alteration of instruction or of the environment to accomodate the novice beyond providing time for the student to practice university-generated activity. The CSP teachers were anxious to both accomodate the demands of the interns' new curriculum and to engage themselves in a new approach to practice as well.

Another arena for collegial consultation was the monthly CSP meeting facilitated by the university supervisor. In contrast to the more informal consultation described above these meetings had an agenda and focused on issues that arose during the course of the work with the interns. They served several purposes. The first was to facilitate communication between the school and the university with regard to procedural matters; a related purpose was to provide opportunity for the teachers to comment on the implementation as it proceeded; and the third - and most important in terms of collegial consultation - purpose was as a forum for continuing collegial reflection on both their own work with the interns and on the nature of the teaching profession and teaching professionals. At a recent meeting one CSP teacher commented

"... just in the last hour we've sat in here we've discussed the loneliness issue; getting out and talking to other people; the dress appearance issue...the culture. How do you train/fit an intern into that? How do you provide them [interns] with experiences so that when they take on the role as professional they understand the culture and become part of it?" [1/31/91]

These issues have become more salient with each semester of involvement in the CSP. The meetings provided time and a chance for the CSP site team members to learn each others' perspectives. As they listened and responded to each others' experiences they began to develop a characteristic way of responding that revealed the beginnings of a common perspective. These conversations served as the basis for more informal interaction among the staff in the days and weeks following the meetings. It is becoming apparent that the nature of the teachers' discourse is beginning to encompass the professional world beyond their classrooms and a concern for the future of the profession. How that discourse has evolved is the subject of a study currently underway.

Clinical Teachers as Colleagues to University Staff

One of the desirable outcomes of the Clinical Schools Project is a reciprocal interdependence¹ between the university educators and clinical teachers. As the relationship between the university supervisor and the teachers at Jose Ortega develops there is evidence that the work of each informs the other in important ways. In the early months of the first year of the CSP partnership there was a great concern on the part of the clinical teachers as to what they should be doing for the interns. Despite the agreement they had made to share in shaping the evolution of a field-practice curriculum the teachers were still operating out of their experiences with university-generated expectations for teachers-in-training. These expectations were the result of both their own experiences as student teachers and as "hosts" to teacher education students who had asked for a place to fulfill their professor's assignment. They had never been asked to look at their practice and to determine the sorts of experiences that would best prepare a new teacher to assume the varied responsibilities of the role of teacher, particularly in the diverse, urban classroom.

CSP Teachers' Impact on Program Design

¹Thompson, J.D. (1967). Organizations in action. New York: McGraw-Hill.(p. 54)

However, as the CSP teachers interacted, formally and informally, with the university staff in multiple settings their concerns lessened. The staff at Jose Ortega began to see that pedagogical knowledge was but one facet of the knowledge base. They became concerned that the interns have some experience of the wider professional role they would be expected to assume immediately upon accepting their first teaching position. They insisted that the interns be able to gain access to the variety of school, district and community resources that were part of the teachers institutional support network. They suggested that the CSP pay some attention to the more subtle elements of teacher preparation that include knowledge of a school culture, of professional etiquette. The teachers told university staff that it was these more delicate, often personal, aspects of teaching that determined to a great extent a teacher's ability to function successfully as a colleague in a school.

As a direct result of the Jose Ortega teachers' recommendations the CSP staff incorporated sensitivity to the norms and culture of a school as one of the standards against which the interns would be evaluated. It remains to be seen how this social and cultural knowledge is being developed at each site. It occupies a place of importance at Jose Ortega largely as a result of the strong norms of collegiality that exist at the school. The CSP teachers have centered many of their discussions on ways for the interns to learn how to extend their practice beyond the walls of their "home" classroom, to integrate themselves into the school community.

In another example, one of the instructors of the courses, before the semester began, asked the CSP teachers to critique her course syllabus and to let her know whether what she had planned was feasible and appropriate. One of the Jose Ortega teachers pointed out some possible problems that she saw. The instructor was grateful and adjusted the syllabus accordingly. Afterward the instructor expressed her gratitude for the response. As one of the Jose Ortega staff noted, because the teachers have been consulted in the design of the coursework the teachers from

the Clinical Schools don't undermine the university instructor's expectations. She said that the instructors' course expectations reflected more of an understanding of the "real world" than had been her experience in the past. She herself, upon being asked whether teachers actually ever did a "miscue analysis" as part of their daily work, told the intern that she - a 5th grade teacher - did not but that it was important to know the strategy; that over time she would find the principles important.

CSP Teachers' Role Expansion: Dilemmas and Tensions

The incident cited above raises a number of interesting questions. The clinical teacher was faced with a dilemma that resulted in a degree of role conflict. Admitting that she does not use a technique that a university instructor asserts is valuable in determining how a student reads is an honest response, consistent with her role as colleague to the intern. Providing a justification for an activity that she did not use in her "real world" but that might prove useful in developing the intern's understanding of the patterned nature of students' reading behavior reflects the teacher educator/university colleague role. An analysis of these tensions in the professional development of the CSP teachers might prove instructive.

Because the university supervisor is at Jose Ortega at least one day a week, [more often for part of two days a week] there are many conversations that serve to bridge the university-school boundaries. These exchanges take place in hallways, classrooms, lunch room, library, playground, school office, outside waiting for the buses to arrive, and at out-of-school social encounters. The frequency of contact and the informality of the interactions tends to diminish somewhat the status differences that often get in the way when university professors talk to classroom teachers. And because the curriculum of the field practice is a joint effort, there is room for dialogue. However, as one teacher noted, "ivory tower talk" still persists and feels that the mode of discourse among teachers is somehow "not as valid". The teachers believe that being asked for input by the university is "powerful" and "important". They note that the program is flexible and growing. But they also

acknowledge that teachers need to "know what they're talking about"; that they "need to understand [their] craft".

CURRENT CONCERNS

At Jose Ortega Elementary School the "clinical school" concept continues to evolve. The high level of collegiality among the staff; the apparent ease of relations between the university supervisor and the teachers; a broadening perspective on the nature of the teaching profession; and an increase in many teachers' reflective thinking about their work create a context for continuing collaboration. There are however areas of ambiguity and concern that persist. As in any innovative practice there are ebbs and flows of energy and commitment. This is true for all the CSP schools and for Jose Ortega. The intensity of the work with the interns from the first semester has necessitated teachers rotating in and out of clinical responsibilities. As one teacher said, the involvement in the CSP has made them more accountable to a broader constituency: interns of course, colleagues, university instructors, and, indirectly, to the sponsors of the Project and to the state department of education which hopes to learn how this more field-based training impacts on the development of teachers. This expanded role which encompasses teacher education as a significant dimension is both welcome and at times daunting. Another teacher admitted she felt deeply responsible to insure that the teaching profession admitted only those who were mature, confident, and well-grounded in both content and pedagogy. She also anguished over having to confront teachers-in-training with difficult messages about their performance and suitability for classroom life. There is a wish among all the CSP teachers to raise the expectations for those entering teaching in complex, diverse urban schools. Yet the challenge as to how best prepare them to do so remains at the heart of much soul searching.

At the midpoint in our work at Jose Ortega there are a number of directions that the work might take. One question of interest is the effect that so much teacher education activity is having on the children. It has been noted informally by several teachers that lots of children at the school want to become teachers. It

would be instructive to talk with the children and gain their perspective. It has been one of our intentions that the work of the interns at the school ought to maximize the instructional power for the children. We need to think how that might better be done. And we need to continue to understand how an intern, a novice draws from the expert teacher the craft knowledge that remains tacit.

Finally it is becoming apparent that the teacher education role is having some effect on the professional development of the teachers who are actively involved in the training of interns. Further study will help us to understand how the act of teaching teachers contributes to the clinical teachers' teaching of children.

**Interorganizational Linkages &
Interprofessional Relationships:
The Clinical Schools Project**

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July 1990

Draft Only

Background: The Context

Proposals for the reform of teacher education (Eg. Holmes, 1986; Carnegie, 1986) assert the need for closer collaboration between universities and schools in the preparation of new teachers. Traditional university-based training has been deemed inadequate for developing the complex knowledge and skills required of contemporary teachers in multicultural, multilingual, settings. The demands of the marketplace and the changed context of schooling requires teachers who are well-grounded in academic subject matter as well as deeply knowledgeable about the developmental needs of students and of the social context in which these students grow and learn. The great variety, especially in urban settings, of social problems that have impact upon the child's school behavior and success results in a need for teachers to perform an increasingly complex and demanding role. The retention of new teachers in urban schools is a critical issue facing the education profession. Closer involvement of school-based professionals in the training of new teachers is believed to be crucial to increasing the capacity of new teachers to successfully meet these challenging responsibilities. The programmatic response to these calls for reform of teacher education has been the development of numerous university-school partnerships.

The Clinical Schools Project: The Plan

In 1988 the School of Education at San Francisco State University received from the Ford Foundation a planning grant to develop a proposal for establishing six (elementary) "clinical schools" in the San Francisco Unified School district. The goal of the Clinical Schools Project (CSP), as delineated in the "Vision Statement" of the proposal, is to

create schools that will offer excellent instruction for students, induct and retain new teachers, and serve as exemplars of best practice.' The collaborative leadership involved in the project will give interns a variety of experiences which will benefit both them and their students. The aim is to increase the resources and responsibilities of experienced teachers who actually supervise interns in partnerships with faculty members from the university. Clinical schools contribute to the knowledge base of effective instructional practice, research in teacher education, and the resolution of problems faced by urban schools. Through the Clinical Schools Project, school site programs and university-based preparation curriculum are continuously improved. A Clinical School is where the expertise and professionalism of teachers, administrators and university faculty continuously interact with the ultimate goal

of effective instructional programs for students.

The proposal for implementation of the Clinical Schools Project laid out the principles and beliefs underlying the project, the conceptual framework which guided the efforts of the planning team and the goals, objectives, and activities for the first implementation year. (See Appendix A) Schools were identified and prospective student teachers were asked to apply for internship positions. The proposal, collaboratively developed by representatives of the School of Education at San Francisco State University, the San Francisco Unified School District, and the San Francisco Federation of Teachers [the bargaining agent for the district at that time], was submitted to the Ford Foundation in June of 1989. In anticipation of funding, the Associate Dean in the School of Education

(who had been director of the planning effort) named a Director for the implementation of the Clinical Schools Project . The director was charged with developing a summer training program for School of Education faculty, school district personnel and student teaching interns who would be working in the six schools to implement the goals of the Clinical Schools Project beginning in September of 1989. Toward that end the director of implementation identified four School of Education Faculty members, who would serve as supervisors in the six schools. The supervisors and the director, none of whom had been on the initial planning team, met four times during June and July to plan the summer training which had been sketched out by the original planning group.

In August of 1989, two weeks before the training was to begin, the School of Education was notified by the Ford Foundation that their implementation proposal would not be funded.¹ The response of the director of the project was to call a meeting of the principals of the six clinical schools, key SFUSD central office administrators, university supervisors, the dean and associate dean of the School of Education to announce the decision by Ford and to solicit recommendations for next steps. The consensus of the group was to first inquire of the clinical teachers whether they wished to go ahead with the project without the remuneration that the Ford money would have made possible; second, assuming the consent of the teachers, to pursue a modified form of the implementation of the clinical schools goals; and third to hold, in lieu of a Summer Institute, a one-day orientation for all Clinical Schools

¹The total budget for the implementation was \$368,289. Consistent with Ford funding policy the Clinical Schools Project submitted a multiple-source line item budget. The total requested from the Ford Foundation was \$69,300. This amount was targeted for graduate assistants, stipends for clinical teachers, lead teachers, consultants, documentation and dissemination, and Summer Institute training.

participants before the opening of school. The Associate Superintendent of the SFUSD affirmed to all present the value of the Clinical Schools concept and supported the effort to go ahead with implementation. The principals agreed and offered suggestions for additional funding sources and strategies.

The Implementation

The implementation of the Clinical Schools Project began in August of 1989 with a half-day orientation of all participants. The purpose of the meeting, as stated in the opening remarks of the Director, was to answer the questions, "Why Clinical Schools?" and "How is it going to work this semester [Fall 1989]?" Representatives from each of the organizations involved in the Project were present: The Dean and Associate Dean of the School of Education, the Project Director, the Associate Superintendent of the SFUSD, the Director of Elementary Education for the SFUSD, the SFUSD Liaison, Principals and teachers from each of the six designated Clinical Schools, University supervisors, and student teaching interns. The function of the meeting was to provide a feeling of belonging to all participants and a sense of shared purpose. All of those gathered knew that they were to be involved in developing a new way of preparing teachers for effective work in urban schools. It was not at all clear how this was to be accomplished. They knew that they would be working with student interns in their last semester of full time student teaching. How this was to be different from the traditional master-student teacher arrangement was to be determined by the school site teams. Participants were cautioned, in introductory remarks by the director, that "things" will not be clearly delineated. Apparently responsibility was being shifted, but responsibility for what and to whom was not satisfactorily explained.

At the end of the morning session participants were asked to express their wishes for the implementation of the project. It was at this time that the fears and hopes of project participants began to surface. And it was at this time that potential problems began to show themselves. In a "Talkback" session at the end of the orientation members of each role group: university personnel, teachers and principals, and student teaching interns, directed statements of wishes, hopes and fears about the implementation to each other. One university supervisor said, in response to a teacher who stated quite forcefully that she wanted the supervisors to be visible, spend time at the site,

We will probably disappoint you, because in addition to the demands of this program there are other demands and I hope you will understand (CSK 8/28/89)

The effect of this message, although not necessarily intended, was to control the teachers' expectations at the outset. It hinted at the difference between the university and school cultures, missions, and environments differences which have become increasingly salient as the project evolves.

Most of the talk, however, was noticeably positive, filled with expressions of gratitude on the part of interns for the opportunity to be trained more comprehensively than they'd have otherwise been. The teachers, for their part, were especially complimentary to the interns saying how impressed they were with the "quality" of the people who were coming into teaching¹. University supervisors told the classroom teachers that they were indeed the "experts" and that they would have much to teach university teacher educators about learning-to-teach in urban schools. There was a general feeling of "bonhomie" all around, in spite of the lack of Ford Foundation funding and, more significantly, a rather vague yet ambitious plan for what was to actually transpire in the schools during the course of the academic year. And so, on a note of optimism in the face of adversity and ambiguity the Clinical Schools Project was begun.

DIMENSIONS OF THE PROBLEM

Uncertainties and Tensions

Not long after that first meeting it became increasingly clear to the Project staff that they were embarked upon an ambiguous mission. At one of the first meetings of the university supervisors (the director of the project was unable to attend) the published agenda was overridden by rapid consensus of the supervisors in order to concentrate on the issues of most-pressing concern to those present. One supervisor, in her first year of teaching and supervision at the University, was anxious about the mechanics of supervision and about her specific responsibilities in that regard. Other supervisors concurred that the responsibilities of the supervisors and the director needed to be clarified immediately as there was perceived encroachment by the director on the supervisors' "turf". When asked by the meeting facilitator what were their "needs at the moment" the supervisors

¹The interns had been selected through an application process that included the recommendation of instructors who had worked with them in the professional development coursework that precedes full-time student teaching. They were not randomly selected but chosen for their presumed capacity to work effectively in multicultural urban settings and for their strong interest in teaching in the San Francisco Public Schools. The teaching "biographies" of those interns selected revealed the most extensive and comprehensive experience in urban school settings.

replied: "What are we supposed to do?" "What is the game plan?" "I question some of the game plan." "Some things are surprising me" [10/6/89] Other concerns, such as a need for policies to be articulated, and for time to talk with the director about "what we're doing in this project" were repeated. The meeting was long and difficult. A memo was sent to the director summarizing the concerns of the project staff. The response of the director to the memo was to express discomfort and to assure the staff that their concerns would be seriously considered in determining the next "course of action". Included with the response was the agenda for the next meeting. Of the five items on the agenda one of the primary concerns expressed by the staff, ineffective communication, was placed last on the agenda!

After three months of implementation the Clinical Schools Project had weathered a variety of stresses and strains. As the partnership evolved issues of authority, power, and control arose. Communication problems continued to be cited by many as a critical issue. Leadership appeared diffuse. Uncertainties about role expectations, responsibilities, and the nature of the task persisted. As a project staff member, a participant observer, I have developed both an inside and an outside perspective. In an attempt to clarify and understand the difficulties inherent in this inter-organizational collaboration I have identified a number of tensions that characterize the problems in the implementation of this interdependent relationship.

ANALYSIS OF THE PROBLEM

In this paper I will attempt to illuminate the tensions which beset this temporary organization (Clinical Schools Project) in light of the participants' conceptions of the task, the different organizational structure and cultures of the collaborating institutions, and the formal and informal structures of communication, power, and reward. Finally I suggest ways in which facilitation of linkages might be accomplished.

Participants' Conceptions of Technology and Task

When there is little knowledge or agreement about the technology, i.e., when goals are relatively well-understood but how to accomplish them is not clear, tension develops as disagreements about how to proceed erupt; struggles for control arise. Similarly when the tasks of an organization are varied and complex a great deal of discretion in decision-making and problem-solving is desirable. Rules, routines and procedures may be insufficient to effectively address situations where interpretation and

judgement are required (Benveniste 1987). In the Clinical Schools Project participants share differing understandings of the how the goals of the project are to be realized.

The Clinical Schools Project was established to accomplish a set of broadly defined goals: enhanced pre-service teacher preparation, the professional development of currently practicing teachers directed toward more effective education for children in urban, multi-cultural environments and the "generation of new knowledge about teaching and learning". The project planning group designed an action plan for implementation which prescribes a set of activities to be carried out, who will be responsible for them, and a timeline for completion (Appendix A). This rational approach to goal attainment has not been operationalized in the ongoing work of the project participants.

One possible explanation is the circumstances under which the Project was begun. Without Ford Foundation money it was deemed unfeasible by the Project Director and Supervisors to undertake immediate implementation of a re-designed teacher preparation program since there would be no money available to compensate site teams (supervisor, teachers, principal) for planning time. It was decided by the Project Director and Supervisors and agreed to by principals and school district administrators that the Fall 1989 semester would be spent in learning the technology of a clinical school approach to teacher preparation and professional development.¹ This would be accomplished by enhancing the student teaching experience in a variety of ways and result in the tasks of the student teaching program in the clinical schools becoming more complex. Since the technology and tasks of teacher education are socially determined we can expect that they would vary from participant to participant and that "participants more closely associated with the actual conduct of task activities will be more likely to emphasize the uncertainty and complexity of the task performed" (Scott, 1987).

In the Clinical Schools Project it is the University supervisors, teachers and principals who carry out the principal task activities. Tasks normally engaged in as part of the technology of schooling now must be expanded or elaborated to include the technology of teacher education and professional development. Because these technologies are not well-defined there is much

¹By identifying the first semester of implementation as exploratory the University was able to keep momentum going and maintain face while seeking additional funding from other sources. In this way the tasks as identified in the action plan were in effect "set aside".

experimentation. Tasks, such as the participation by interns in student evaluation, parent conferences, and school governance have developed as individual participants (supervisors, teachers, principals) reflect on how better to prepare new teachers for the real world of schooling. The differences in task and technology derive from the situation at each school, the level of sophistication of the participants with respect to knowledge of teaching and learning, the experiences, strengths and personal and professional interests of participants. For example, as a supervisor I see one task as continual listening and talking with participants. Through such intense communication I can stimulate reflection and learn the mutual needs of teachers, interns, principals and suggests ways in which the school and university can address those concerns.¹ This is not the same conception of the task and technology held by other supervisors. My conception of the work requires a lot of autonomy and discretion. One supervisor, new to the faculty and to supervision, has asked repeatedly for procedures and policies to be explicated with regard to what she's "supposed" to do as a supervisor. I am interested in exploring and forging new roles for the university in schools. My urgency to move beyond what another supervisor is just beginning to learn creates a tension that makes consensus about the technology of the Clinical Schools Project problematic. We share different conceptions of the task.

Differing Organizational Structures as Source of Tension

The Clinical Schools Project is a joint program collaboratively devised by representatives of two different educational systems. The participants in the project bring to their work a set of beliefs about their respective institutions and a conceptual framework by means of which they interpret their experiences. The Clinical Teachers, based in the school district, have been anxious for rules, procedures, expectations to be delineated for them. They want to know what they "should" do. Such expectations reveal a conception of their organization as a rational, bureaucratic system. They are accustomed to functioning "as if" the institution reflected Weber's "ideal

¹For example, in talking with a classroom teacher I learned that the teacher has noticed a marked difference in the reading performance and enjoyment of her class this year since the introduction of a new whole-language approach to teaching reading. I saw this as an opportunity to stimulate the teacher's professional development by suggesting that she record her observations as they occurred, and to synthesize them. I told her that it would be a contribution to professional knowledge to have that kind of first-person account of her experience and that she might share that with other teachers in print or in a workshop or presentation at some time. I said I would help her get started. She agreed to start.

type" bureaucracy with, for example, a fixed division of labor, a hierarchy of authority, a system of rules (In Scott, 1987). These perceptions that there is a way things "should be done" strongly influence teachers' interactions with university supervisors and lead to frustration when they are encouraged to suggest, as they have been during the early implementation stages, what "might be done". University supervisors, on the other hand, are socialized to the higher education institution as a "loosely coupled" system (Weick, 1976 ; Lutz and Lutz, 1988) . The autonomy , discretion and limited interdependence that characterize activities at the university foster initiative and professionalization. In the case of the CSP participants all the university supervisors have been at one time classroom teachers and have had some experience of the more tightly controlled bureaucratic organization of the schools. However, none of the school district participants have had experience as participants in the dual governance university structure which allows for greater participation of professionals in decision-making (Benveniste, 1987) . Stretching to accomodate each others' conceptual frameworks creates tension for both university supervisors and teachers. Issues of status differential emerge.

Another way to understand the tensions created by different organizational structures is to view the CSP organization structure as a modified matrix (Fig 3). Matrix organizations, as described by Lawrence and Lorsch, 1967, Scott, 1987 and Benveniste, 1987, provide a way to increase capacity for managing complex projects and for problem-solving by linking the expertise across functions or departments. While such structures enhance communication and problem-solving by taking advantage of horizontal communication, participants in matrix systems are simultaneously responsible to two authorities. Balancing loyalties and responsiveness to each creates tension. In an effort such as the Clinical Schools Project where one authority resides in the school and the other in the university the possibilities for conflict are numerous. Each member of the project is responsible to the Project Director at the university and to the authority in his or her own school or department. Much of the work of the project is transacted at meetings. The task of scheduling meetings is one source of continuing frustration because of this dual loyalty and accountability. For example, the school district liaison, whose role is to keep the district administration informed of the work in the clinical schools was asked by the project director, a university professor, to accompany her on site visits. The liaison was told by her superior in the district office to remember that she was "only .2 (20%) with them (the university)." The liaison decided to decline the invitation to visit the sites, apparently interpreting her superior's comment as discouragement. Loyalty to the permanent rather than the temporary organization was paramount.

Inter-Cultural Tensions

Universities and schools operate from sets of assumptions, values, beliefs that taken together comprise an organizational culture. The "way things are done" varies from organization to organization as a function of the history, tradition, participants of that culture. These differing ways of perceiving, believing and acting become salient when organizations join in a common endeavor. Culture includes but does not follow from the structures of the organizations. Organizations may have the same structure but have significantly different cultures (Schein, 1988). One of the clinical schools assumes the school as a family. Relationships between members of that school community promote interdependence. The roles and expectations of staff and students are "family-like" in that nurturance of individuals and of the group is paramount. Celebrations are a prominent artifact of that school's culture. Pride in the accomplishments of the members of the group is shared by all. This is in contrast to the culture of the large state university with which it is in collaboration. Identified in its official logo as "The City's University" San Francisco State is not only structurally different from the elementary school family, it is also culturally different. It in fact comprises many sub-cultures.

The work of elementary school teachers is closely time-bound and there is little or no slack. University professors enjoy much greater discretion over time and can afford to take a long view. Their perspective is broad because they have the distance of time and space. The perspective of teachers is constrained by the immediacy of their daily concerns. Schools tend to adopt a reactive stance, university faculty a proactive one. The tensions that arise because of these basic differences create frustration on both sides.

Related to conceptions of time are those of space. Space in elementary schools is designed to constrain, to control. Teachers are not free to move about. Interpenetration of the boundaries of the school organization by teachers occurs with some difficulty. It is even more difficult for "outsiders" to enter the school "spaces". Many schools have policies restricting entry to the school facility and procedures that must be followed in order to gain access. Entry to teachers' classrooms is controlled by the "egg-crate" design of many school buildings, by the tradition of privacy, and in some urban schools by the need to lock the classroom doors during instruction for safety reasons. On the other hand university space is more open to the environment. It is much easier for university faculty to move about, to confer with colleagues, to interact with the environment.

The conceptions of time and space in elementary schools communicates a lack of trust. The high degree of control and lack of slack assume that school-based professionals must be scrutinized. This often results in resistance to outsiders which can inhibit collaborative activity. The tensions which arise from what Lortie (1975) calls the "persistence of privacy" in schools make it incumbent upon university supervisors in the Clinical Schools project to be especially sensitive to this cultural dimension. These discrepancies in the assumptions about time and space continue to be important issues in the development of the collaboration. It has become one of the focal elements in the developing technology of a "clinical school".

Formal and Informal Structures

The ambiguities and frustrations which characterize the implementation of the Clinical Schools Project result in part from an expectation that the formal structure should guide project activities. In spite of the admonition of the project director to the participants at the orientation meeting that things would not be delineated there persists a demand for policies and procedures and for clear and consistent communication. The formal organizational chart as proposed by the planning committee does not, however, reflect the activity of the project. It is instead the informal structures that drive the implementation. The formal structure serves other purposes.

One of the first tasks of an organization is to develop a formal structure. It is believed that this rational activity of delineating goals, policies, roles and responsibilities, communication flow, procedures and processes is the most effective way to coordinate and control activity toward the achievement of organizational goals. Such action also conforms to socially expected institutional behavior and gains for the organization legitimacy, stability, and resources. It has ritual significance and "maintains appearances and validates an organization" (Meyer and Rowan, 1977). The formal organizational structure of the Clinical Schools Project bears little relation to the activities currently in progress as the participants interact across the boundaries of the two institutions. The work of the project is social, relational, not technical. Unpredictability is a salient feature of project life. Its technology is ambiguous and evolving; the transactions between the university and the school require flexible and adaptive behavior. The tensions and problems created resist bureaucratic and technical solutions. The formal structure exists for purposes external to the technology of teacher education in clinical schools.

During the course of the implementation tensions have arisen in part because of lack of understanding by participants of the differing roles of the

project participants with respect to the maintenance of the "myth" of the formal structure. The deans and superintendent must maintain "face" with the environment. The so-called "ceremonial requirements" must be maintained in order to continue to attract resources and to maintain credibility. The deans and superintendents are distanced from the ongoing practical activities at the school sites and a "decoupling"¹ of the formal structure from the activities has taken place. As Meyer and Rowan (1977) point out legitimation of the activity derives from the "confidence and good faith" of the participants and their constituents. An illustration of the effect of this faith can be seen in an encounter between one of the supervisors and several non-participants at the school site. Several times during the semester paraprofessionals working in one of the clinical schools have approached the supervisor and expressed an interest in becoming involved in the Clinical Schools Project. They had seen the interns working at the site but they had no formal information on what the project was, what the goals were, nor what the advantages were for them to be involved (Stipends for the interns had been eliminated when resources became scarce.) Yet, in spite of lack of information about the project they perceived it as a good, valuable, worthwhile enterprise. Despite the ambiguity and diffuseness of the project activities it is perceived as both a credible and legitimate organization.²

Communication Structures

In the Clinical Schools Project activities are varied and complex. They are multi-locational and multi-leveled. As a result uncertainty is high and problems become multi-dimensional. Interdependence requires more

¹ Meyer and Rowan (1977) illustrate the decoupling process thus: "Activities are performed beyond the purview of the managers. . . . Goals are made ambiguous or vacuous, and categorical ends are substituted for technical ends. . . . Integration is avoided. . . . inspection and evaluation are ceremonialized. Human relations are made very important. The organization cannot formally coordinate activities because its formal rules, if applied, would generate inconsistencies. Therefore individuals are left to work out technical interdependencies informally. The ability to coordinate things in violation of rules - that is, to get along with other people - is highly valued. (p. 35)

² Deetz and Mumby (1985) suggest that the channeling of perceptions in an organization occurs through the use of metaphors which "can be viewed as manifestations of organizational ideology." (p. 374) This reinforcement of "the way things are" is thought to reflect the power interests in the organization: "Once a particular taken-for-granted world view has been established within an organization, its reproduction is assured as long as new information is mediated by the dominant metaphors used to describe the organization." (p. 382) This perspective on organizational power and control, while not pursued in this paper, seems a promising approach to understanding the conflict between ideology and practical activity that is emerging in the Clinical Schools Project.

frequent communication, therefore more meetings. The volume of complex interactions necessitates constant monitoring and adaptation (Aiken and Hage, 1968). One of the first tasks of the Project Director was to draw up a formal communication network (See Appendix B) delineating the line of communication among project participants. However, the actual communication that takes place in the course of project activities in no way resembles the neat framework devised.

In a complex organization informal communication structures allow for error correction (Blau & Scott, 1962) and provide for social support which encourages all participants to seek solutions to problems (Miller, 1986). Communication is necessary to reduce uncertainty and resultant stress. Uncertainty reduction allows people to describe, predict, explain (Day, Waldfarth, Seibert 1985). In a project which involves the spanning of institutional boundaries continual communication contributes to the maintenance of integrity of the project.

Obstacles to Communication

Physical Obstacles

From the outset the need for information to be uniformly distributed to project participants has been an important concern of the project director. And from the beginning obstacles to communication have proved a continuing challenge. These obstacles can be viewed from different perspectives. In a study of inter-departmental conflict, which is seen to belong to the general category of boundary relations problems, Thomas (1972) found that physical obstacles inhibit communication. While this is not a surprising finding it is a critical element in the communication difficulties among participants in the Clinical Schools Project. The physical barriers to communication between the School of Education and the school sites are great. The six schools are located across the city. Travel time between school and university and the difficulty of parking in some school neighborhoods limit the time available for university participants to contact schools [One supervisor lives 50 miles south of San Francisco and must travel to the school farthest from her home to supervise!] Less dramatic, but no less frustrating, distances and barriers exist in the School of Education itself. The administration department is located on the second floor of the building. The Elementary Education Department is located on the first floor. Because of this and of the placement of the offices it is rare for the deans and the faculty to encounter one another informally during the course of a work day. Therefore, appointments must be made. Given the overburdened schedules of the deans it becomes very difficult for information to reach them from

below. [In an act of extraordinary accomodation one dean, unable to find a meeting time on campus to talk with one of the supervisors agreed to a meeting at the elementary school site where the supervisor worked.] Likewise the teachers in their classrooms for most of the day are insulated from contact with each other and with university participants. In order to overcome these physical barriers supervisors must time their visits and interactions to coincide with teacher "break" times.

Lack of Familiarity with Task and Participants

Thomas also points out that unfamiliarity with the task and of participants to and with one another interferes with communication. As I have indicated above the task is ambiguous which makes it difficult to talk about. This lack of clarity has resulted in unsatisfactory meetings of supervisors and some strain in interactions with teachers and principals. The degrees of familiarity between participants has had an important impact on communication. Interpenetration of boundaries, especially by those of higher status , requires an extension of trust that comes with familiarity over time. Two of the supervisors are new to the schools with which they work; two have long histories with their schools. The deans are well-known to all of the school personnel as is the Project Director. The ease of communication among members of the school site with the supervisor has been a factor of this level of association. Candor is more easily expressed between those supervisors and school participants who have known each other for some time. Candor results in the surfacing of difficulties that can be addressed and corrected. In schools where there is limited familiarity the reticence associated with limited familiarity has had serious consequences.

In one instance early in the implementation an intern, assigned to a school with a new principal who a) was not familiar with the goals of the project (task) and b) unknown to the supervisor, became skeptical of the competence of the clinical teacher to whom he was assigned [The new principal had made the placement.]. He complained to the supervisor. While the supervisor was determining the best course of action to both meet the needs of the intern and to maintain respect for the teacher and the principal the Project Director, who knew both the intern and the teacher intervened. Without communicating her intentions to either the supervisor, teacher, or principal she arranged another placement and had him moved the following day. The swiftness of the Project Director's action and inadvertent disregard for the autonomy of the supervisor , the feelings of the teacher and authority of the principal resulted in the eruption of powerful feelings of hurt and anger. Carpenter and Kennedy (1988) point

out that in a dispute or conflict participants know a lot about their own problems and that information is valuable in "achieving public understanding and support". Because of the decentralized nature of the project "at no time in its decision-making processes is complete information concerning the environment (including all other agents' circumstances) and prospective actions of all parties available to any one agent " (Huwricz, 1972) Even given that this is so additional information would have mitigated the difficulty. In the case cited the personal knowledge of the participants in the conflict was inadequately considered and led to the withdrawal of support by the clinical teacher.

A violation had occurred which made manifest both the power of the informal communication structure and of professional norms. The situation served to remind the university partners of their collaborative responsibilities and of the importance of parity in decision-making. It functioned as a rude reminder that the traditional top-down, outside-in approach to university-school relationships would not be tolerated. Because the director was unfamiliar with all aspects of the problem, (and was still learning the dimensions of the director's role) communication had been seriously impaired.

Differing "Frames"

Bolman and Deal (1984) point out that difficulties or conflicts in an organization arise because participants view organizational processes from different frames (structural, human resource, political, symbolic). The process of communication may be viewed as the transmission of facts and information (structural frame), the exchange of information, needs, feelings (human resource frame), the influencing or manipulating of others (political frame), or the telling of stories (symbolic frame). When problems arise they are interpreted differently depending on the "frame" of the participants in the organization. Without some understanding of the different frames by which participants interpret the communication function - including his/her own - confusion and frustration are likely to persist. In the case of the Clinical Schools Project people at different levels of the organization tend to communicate differently and to focus importance on what is communicated according to their frame of interpretation. The deans tend to communicate in ways so as to influence the perceptions of clients, to draw resources. They tend to interpret from a political frame. The Project Director operates from a human resource frame and pays attention to the exchange of information, needs and feelings. The Director has a tendency to be open in her communication of this information, need, and feelings. At the site level both

the transmission of facts and the exchange of information, needs and feelings characterize the communication between teachers, supervisor, interns, principal. One of the demands on the supervisor is to be attentive to the differing frames of the participants and to "re-frame" a communication so that it fits the frame of the receiver.

Advantages and Limitation of the Informal Communication Structure

Communication is necessary in the CSP in order to coordinate activity and to monitor the activity at each site for indicators of the developing technology of a clinical school approach to teacher education. Since the interns are in their final stage of preparation for a Multiple Subjects Credential there is also need for communication between the clinical teacher, intern and supervisor with respect to the growth in knowledge and skill in teaching. Both intra- and inter-organizational communication occurs. The formal communication structure consists mainly in: a Weekly Memo prepared by the director of the project and distributed to all participants; twice-monthly meetings of the director, university liaison, and supervisors; occasional meetings of the clinical teachers and project director; occasional memos and letters. The function of the Weekly Memo, as stated by the Project Director, is public relations. It serves to inform participants of meeting schedules and to communicate the developing ideology.

However, the formal communication structures have limited impact on the direction of the activity of the project. It is the informal communication that leads to decisions which inform the project, to the detection and correction of errors. Spontaneous hallway conferences, telephone calls - both at home and at work - notes, impromptu conversations at social gatherings make up the informal communication structures of the project. The project director and the dean are in continual contact at important decision points. The on-site visibility of the supervisors is the most valuable source of information and ideas as to how to further implement the clinical schools concept. At sites where the supervisor is present for extended periods and engages in numerous interactions with not only the clinical teachers and interns, but also with the principal, the clerical and custodial staff, the special education and resource teachers and the paraprofessionals, numerous ideas have been generated and transmitted to the project staff. The supervisor thus plays an important boundary-spanning role in the informal communication structure.

Because time and space influence informal communication it has been interesting to note that those project staff members who encounter one another most frequently appear to have influenced the thinking that guides

the decisions in the project. For example, during the Fall semester, the director, the university liaison and one of the supervisors were the only staff members at the university on Fridays. They arrived in the morning and generally didn't leave until nearly 6:00 pm. Because they frequently encountered one another throughout the day they had more opportunities to exert influence on the project direction than those staff members with different schedules. Analysis of those encounters and subsequent project activity will reveal the extent to which that influence affects behavior.

While this frequent informal communication is necessary to deal with the complexity of the project activities it has also been the source of much frustration. The director of the project told one of the supervisors that sometimes she thinks she has communicated a bit of information to all concerned, but has in fact only imagined that she has. Statements are made that later have to be retracted. Dates and deadlines are published that later have to be revised. While it may not be intended such behavior has the function of keeping control. This is especially problematic for the supervisors who are faculty colleagues of the director and who, as professionals, place a high value on participation. The shift in role relationship creates strains for each party, a tension relieved by opportunity for participation. In a project that is expressly identified as a collaboration, one which seeks to empower teachers and professionalize teaching, the desire and need for constant, consistent communication is powerful.

Reward Structures : Teachers

A continuing tension in the transactions that take place between the participant organizations in the Clinical Schools Project and their environments is generated by the differing formal reward structures of the two institutions. These tensions are manifested in the amount of time and level of commitment to the project displayed by teachers, principals and university faculty. Teachers have few formal incentives for performance. The salary schedule is rather flat and teachers reach the top of the scale relatively early in their careers (Benveniste, 1987). Recent efforts at building career "ladders" for teachers with concomitant compensations do not reach the majority of teachers. Therefore teachers must look inward, to intrinsic rewards. The work itself, the approval of colleagues, invitations to share their expertise, combine to keep teachers motivated and challenged. When the clinical teachers were asked at the outset whether they wanted to be involved in the development of the clinical schools in spite of no financial compensation for their time all teachers agreed.

What, we might ask, did they see as an incentive for participation? Documentation of project activities reveals that the teachers are motivated by being part of something new, of being actively involved in developing a new way of training teachers. They are also rewarded by having another teacher (intern) in their classroom. It reduces isolation, provides additional support for the children and brings new curriculum knowledge into the classroom. An additional informal incentive for participation is the prestige that derives from association with the university, a high-status institution.

Reward Structures: Professors

University faculty are formally rewarded with tenure and promotion for those activities that enhance their reputations in the wider professional world beyond their institutions. Such recognition enhances, by extension, the reputation of the university as well. The traditional means for accomplishing this is scholarly activity, in particular publishing. In many institutions the perception persists that teaching, participation in university governance, and community service are less influential in the tenure and promotion decisions. This has always been true at the large research institutions; it is becoming increasingly so in the state university. Therefore, given a choice of activity the tenure-track faculty member is likely to engage in that which holds promise for scholarly activity.

As with teachers faculty look to intrinsic rewards as motivation to engage in work. Peer recognition, the opportunity to influence policy, the doing of the work of teaching and inquiring, prestige associated with university faculty status serve as informal or intrinsic rewards.

Reward Structures and Tensions

As the Clinical Schools Project develops several project supervisors have become increasingly resentful of the amount of time the interface with the schools is taking. At a recent meeting of the clinical teachers from the six schools, in response to the question "What's working?" many teachers commented that one of the things they liked about this partnership was the increased visibility of the university at the site. Given that association with the university is an incentive for teachers it seems reasonable to assume that the teachers' continued commitment to the project rests in part on the supervisors' presence and participation at the schools. On the other hand, the supervisors' incentives for participating differ depending on their role and status in the university. Supervision, even in the context of enacting a program change or developing linkages with the field, is not a high status activity at the university. It carries more intrinsic than extrinsic reward. As

faculty try to balance their participation with other reward producing activities tensions develop. McInerney (1987) reporting on the problems experienced in a university-school partnership project between Purdue University and the Twin Lakes School District cited suspicion of the part of teachers that the university was interested only in career enhancement and not "sincere" in working with the public schools. There were several references in feedback to the university to "getting your article out of this" An illustration of the effects of faculty concern with scholarship follows:

Two of the CS supervisors are new tenure-track faculty. One of these supervisors has never supervised student teachers before. The two other supervisors are lecturers who are, for the most part, outside the formal reward structure. The tenure-track supervisors are under pressure to produce evidence of scholarly activity for retention and promotion. Their inquiry and writing must be done "on top of" their regular teaching/committee/advising work. Their research interests, for the most part, exist apart from their work in the project. As a result their time is at a premium and their attentions divided. Meanwhile the two supervisors who are in lecturer positions are in some sense freer to choose to spend additional time in transactions with the schools. Each of those supervisors has been at the university for some time and each has a research interest in the CS project. Their incentive derives from the activity of the project itself and allows them to commit greater time to participation, not only in the supervision and interaction activity at the site but in the continuing reflection and conceptualizing of the collaboration as it evolves.

These differing concerns and degrees of participation among university staff, due in part to differing reward structures, have impact upon the expectations of the six school sites. There is frequent, informal, cross-site communication and comparisons are being continually drawn. The "continuous interaction" called for in the Clinical Schools Project vision statement is threatened. Those sites which receive less attention from the university may over time lose some incentive to participate, and the university will lose the infusion of practical knowledge and wisdom necessary to develop meaningful effective teacher education. Less frequent contact tends to reinforce an "us" - "them" dichotomy. This has implications for the facilitation of inter-organizational linkages.¹

Summary of Tensions and Challenges

¹ See Hirschman (1970), Exit, Voice and Loyalty for a discussion of the "exit" option in American ideology and practice

The problems which beset the Clinical Schools Project in these early stages of implementation are experienced at the level of the person. However, they can be seen to originate at the level of the organization. The temporary organization, Clinical Schools Project, was created to facilitate the spanning of the boundaries of an institution of higher education (IHE) and a local educational authority (LEA). Its primary goal is the improvement of education for children and professional development for teachers. The ambiguity of the tasks (caused in part by broad, diffuse goals), differing organizational structures and cultures, and the impact of the formal and informal structures of power, reward, and communication combine to increase uncertainty and create tension.

RECOMMENDATIONS

In these early stages of the Clinical Schools Project uncertainty and unpredictability are high. Much of the difficulty created this semester has been caused by the ad hoc, idiosyncratic approach to the task. Therefore measures designed to reduce complexity and uncertainty are necessary. It is clear that communication is a dominant and chronic issue. For the short-term the following steps can be taken:

1. Schedule a "retreat" for project staff, including teacher representatives - away from the workplace. The function of the retreat should be to first, acknowledge participants need for information and participation; second, to learn how each supervisor worked at the sites and to synthesize individual participants' learnings from this first semester; third, review the original action plan (for which there was no time at the beginning of the term) and decide how to proceed. The anticipated consequences of such an activity will be an empowering through participation.
2. Establish a small research agenda in order to systematically study several aspects of the project to better inform future efforts.
3. Establish a master calendar for the rest of the year that includes all time commitments for participants. Distribute to all project participants.

These immediate steps to reduce uncertainty and frustration will allow participants to derive a "big picture" view of the project and of their place in it. A long block of time is necessary to allow for processing the complex activity. In the long run, it might be important to consider the feasibility of reducing the span of control by focusing activity at fewer sites. This would serve to reduce the multiple communication links that must be maintained.

It would also increase the amount of time available for deeper engagement between schools and university and between the clinical schools themselves. Interprofessional communication and collaboration between teachers and principals at the sites might yield a richer conceptualization of the technology of teacher education. With activity concentrated in this way the development of models for professional development from pre-service training to career long teacher education could more easily arise. At the same time, further informed consideration of the interorganizational relationship itself must continue. Continual attention to the boundary activity is necessary in order to sustain linkages.

Facilitating Interorganizational Linkages

The supervisor operates at the nexus of the university and school. In an inter-organizational partnership such as the Clinical Schools Project the role of the supervisor becomes one of facilitation as well as supervision. Aiken and Hage (1968) suggest that "The establishment of collegial relationships with comparable staff members of the other organizations provides them with a comparative framework for understanding their own organization." The collegial relationships now being established between university faculty and School District participants challenges the assumptions and myths that each has formed out of the traditional separate and unequal relationship. The participation of Clinical Teachers in university teaching experiences serves to demystify to some extent the "ivory tower" concept. The participation by the university supervisor in the life of the school, e.g., teaching children, attending faculty meetings, social gatherings, consulting with the principal, conferring with interns, engaging in conversation with secretaries, custodians, lunch room workers, paraprofessionals, resource teachers, librarians serves to throw into high relief the dynamic nature of the school culture and community. Such intentional involvement also communicates to the staff of the school a "participation in" rather than "visitation to" the community. It then becomes incumbent upon the supervisor to act on this knowledge in the course of interactions with the Project participants at the university. Such knowledge can only be had by direct experience over time.

In a study of university-school partnerships McInerney (1988) concluded that the institutionalization of collaborative relationships between IHEs and LEAs requires the creation of new roles. Institutional arrangements and organizational structures are necessary but insufficient for an effective relationship. There is need for a "broker" who "trades in ideas and cooperation - a person with a foot in each world." He goes on to recommend

that such a role be taken by someone with a "quasi-administrative orientation", one who can serve as a communication channel and interpret from one culture to another. In the Clinical Schools Project this role is being taken by the university supervisor. This facilitative, boundary-spanning role requires strong interpersonal skills. The behavior of boundary personnel at the interface of organizations can lead toward conflict or coordination (Tuite, Chisholm, and Radnor, 1972). therefore the selection of persons to take on the role requires careful attention to those qualities of mind and personality that allow for ease in each setting.

Forging relationships between schools of education and local school districts that give parity to each partner in creating meaningful, mutually satisfying activity will be difficult and, as in the case of the Clinical Schools Project, fraught with tensions and uncertainty. The power of the traditions of each institution asserts itself against significant change. However, the survival of university-based teacher education is dependent, perhaps more than ever, on the knowledge and energy that comes from the field of teaching practice. Maintenance of the difficult and delicate balance between professionals at the nexus of the two institutions must be a priority.

References not included



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School of Education

CLINICAL SCHOOLS PROGRAM

Proposed by the School of Education
Graduate Division of Teacher Education

August 1990

INTRODUCTION

A plethora of research findings and reform reports give direction on how to address the needs in teacher education. In particular, the Carnegie Report (1986) calls for a "strong element of field-based preparation emphasizing opportunities for careful reflection on teaching integrated with a demanding program of academic coursework."

For the past two years, collaborative teams from the San Francisco Unified School District (SFUSD), San Francisco State University (SFSU) and the United Educators of San Francisco (UESF) have developed and field tested a clinical, professional development school approach to the education of prospective teachers.

This approach encompasses (1) earlier student teaching placements in "field-real" settings where the prospective teacher is an intern in an elementary school; (2) emphasis on multicultural education, including a wide range of cultural groups such as females, handicapped persons, and various ethnic groups; (3) fuller participation by field practitioners in supervising and training student teachers; (4) new teacher induction; (5) greater learning opportunities for elementary school students; and (6) professional development for inservice teachers.

The School of Education at San Francisco State University is proposing a three-semester experimental teacher preparation program that will: (1) take place in collaboration with the faculty, students and administrators in six clinical schools; (2) serve approximately 24 interns and their student teaching supervisors; (3) answer specific questions about the content and nature of best practice in teacher preparation; and (4) share more fully with field practitioners the responsibility for teacher preparation.

The City's University

Those most directly served will be the elementary school students and the clinical interns at the six clinical schools, which are: Alamo School, Alvarado School, Cabrillo School, Sir Francis Drake School, Marshall School, and Jose Ortega School.

OVERALL PROGRAM OBJECTIVES

The Program objectives are as follows:

- . To restructure the Multiple Subjects Credential Program to reflect best practice and research pertaining to teacher education;
- . To develop models of shared responsibility between clinical teachers and University faculty in the preparation of credential candidates;
- . To provide approximately 24 credential candidates with enhanced teacher preparation experience at six clinical school sites;
- . To evaluate the effectiveness of the Program;
- . To introduce successful practices of the experimental Program into the regular program, as appropriate; and
- . To conduct field-based research, inquiry, and evaluation activities which contribute to the generation of new knowledge regarding teaching, learning, and teacher education.

STANDARDS FOR APPROVING EXPERIMENTAL PROGRAMS

Standard 1. Research Questions, Hypotheses or Objectives.

The postsecondary institution submits one or more research questions, hypotheses or objectives that relate to fundamentally significant issues in the selection, preparation or assessment of prospective professional educators.

Standard 2. Research Design.

The postsecondary institution submits a research design that would clearly resolve the research questions, test the hypotheses, or attain the objectives in the course of operating the program.

Research Design. The Program will include a research component designed to enhance the understanding of:

- . The contribution of field experiences, i.e., classroom observation/participation and student teaching to the education of prospective teachers;
- . The differences in the planning, teaching, and post-lesson reflections of expert teachers and student teachers, and how the understanding of these differences can improve teacher education;
- . The process through which credential candidates develop their expertise -- the manner in which they learn what they know about teaching.

The Director of the faculty Research and Development Center, School of Education, San Francisco State University -- a nationally recognized expert in the areas of educational research and program evaluation -- serves as a consultant to this program.

Research Questions. The research questions to be addressed are outlined below:

1. How and what do field experiences contribute to the education of prospective teachers?

Although prospective teachers view cooperating teachers in the field setting as having the most significant influence on their success as teachers (Sadler, 1974; Karmos and Jacko, 1977), what students learn from these teachers has never been adequately documented, described, or reconciled with University instruction. The Clinical Schools Program will delineate the Curriculum of Field Practice; that is, student teachers will document the field learning from observation/participation and from their teaching experiences.

Data Sources. Data sources will describe what prospective teachers learn and can learn from their field experiences. These sources are:

- 1) Taped in-depth interviews with interns, clinical teachers and University supervisors;
- 2) Content analysis of all journal entries of all interns in the cohort;
- 3) Observation and analysis of live and videotaped teaching performances by candidates sampled periodically throughout the Program;

- 4) Administration of rating scales; and
- 5) Administration of self-evaluations based upon category No. 5 of the CTC standards.

Case study methods will be used as appropriate.

Methodology. In-depth interviews, questionnaires and content analysis methodologies will be utilized to answer the question. A randomly selected sample of five to seven interns will be interviewed in-depth, using an open-ended interview schedule (to be developed) to ascertain their impressions of what they have learned in the program. In addition, a different, randomly selected sample of intern journals will be content analyzed, all interns will be interviewed using a matrix sampling technique, and the entire group of interns will be surveyed via a close-ended questionnaire as a validity check of the interviews. Clinical teacher exemplars will be identified as a basis for determining what can best be learned through field experience.

- 2) What do the differences in planning, teaching and post-lesson reflections of expert and novice elementary school teachers reveal about teaching and learning, and how do they inform practice in teacher education?

Teaching is a complex, cognitive skill. Recent research indicates that there are qualitative differences in the thinking and actions of experts and novices (Fredericksen, 1984; Reed, 1982). Information that is useful for experts has little or no meaning for novices (Egan and Schwartz, 1979). Experts make great use of their exemplars and previously learned schema about management and interactive teaching; yet novices have little or no repertoire from which to draw (Leinhardt and Greeno, 1986; Warner, 1987).

Data Sources. Data sources will describe (1) the differences between expert teachers and credential candidates in planning, teaching, and reflecting upon the teaching process; and (2) the process by which credential candidates develop expertise. These sources are:

- 1) Structured interviews with expert teachers and credential candidates;
- 2) Analysis of videotapes of the teaching performance of expert teachers and credential candidates; and
- 3) Classroom observation.

Methodology. In-depth interviews and structured observation methodologies will be utilized to answer this question. Both expert teachers and novice elementary teachers will be

interviewed in-depth and their reactions compared along a number of dimensions. Furthermore, videotape lessons of a sample of both groups will also be analyzed to ascertain differences in their planning, teaching, and post-lesson evaluation.

Data collection will be coded into categories of thinking and action based on patterns that emerge from the interviews. This system is defined by Hawes (1987) in the Pragmatics of Analoging.

Four student teachers and four clinical teachers will be selected for this study. They will be selected based upon specified criteria and will be followed for one year.

3) What is the process through which new teachers develop their expertise?

Berliner (1988) has developed a five-stage model of pedagogical expertise based upon the Dreyfus and Dreyfus (1986) model of expertise. Berliner himself notes that the application of his model to pedagogy needs to be tested. To date, the research has considered only high school mathematics and science teachers and student teachers. We propose the following research design to clarify our question:

Data Sources. Data sources will describe the ways which new teachers learn how to teach -- "ways of knowing." Data will be gathered through:

- a) Taped, in-depth interviews with all interns;
- b) Analysis of journal entries of all interns;
- c) Periodic self-evaluation by interns in relationship to Commission standards (Category 5).

Methodology. In-depth interviews and structured observation methodologies will be utilized to answer this question, as well as non-participant observation of the interns as they teach. This will include interviews related to specific observed lessons. These interviews will be directed toward their instructional lessons, their management plans, and their post-lesson reflections after teaching.

Berliner's five-stage model will be one of the paradigms used as a mirror through which what can be learned from the classroom observation data and the interview data can be reflected. The model will suggest differing levels of competence against which to measure intern performance. In addition, it will assist us in distinguishing between novice and expert behavior.

Findings of the research will be disseminated through presentation to professional groups and articles in professional journals.

Standard 3. Potential for Improved Service

The postsecondary institution submits a research proposal which clearly shows that the knowledge generated by operating the experimental program could eventually and generally improve the quality of service authorized by the credential.

The data gathered by the methods listed above will be analyzed to identify successful practices which can be incorporated into the regular Multiple Subjects Credential Program, and conclusions will be drawn regarding:

- a) The contribution of field experience to professional development;
- b) The differences between expert teachers and student teachers in planning teaching and reflecting upon lessons; and
- c) The process of development of pedagogical expertise. Research findings will be disseminated via presentations at professional meetings and through publication.

This process will be the responsibility of an Institutionalization Team identified during the second semester of the program. The team will be headed by the Co-chair, Graduate Division of Teacher Education at San Francisco State University.

THE CLINICAL SCHOOLS PROGRAM

The unique features of the program are:

- 1) Instructional Teams - A team of University faculty will be responsible for instruction and supervision throughout all three semesters of the program. Individual experts will be brought in as needed to augment instruction.

Classroom teachers from the six clinical school sites and faculty from the Department of Elementary Education at San Francisco State University will constitute teaching teams. Teaching demonstrations will take place in the elementary school classrooms. Student observation/participation will be supervised by team members.

- 2) Urban Education - Special emphasis will be given to developing the requisite knowledge and skills for teaching a linguistically and culturally diverse student body. An array of strategies for teaching children with limited English proficiency will be developed with credential candidates and utilized by them in their work in the elementary school classrooms. The development of multicultural competencies will permeate the instructional program.
- 3) Integrated Curriculum - The curriculum will be integrated around several cores: a foundations core; a reading/language arts/social studies core; and a mathematics/science/technology core. There will be careful articulation, coherence, and circling among each component of the curriculum.
- 4) Reflective Teaching - Teaching will be studied as a complex, cognitive activity requiring a high level of thought, interaction, and decision making. In order to maximize opportunities for learning to teach, a plan/action/reflection/analysis format will be used in the course work and field experiences.
- 5) Clinical Teaching - Extensive opportunities will be provided for students to assume teaching responsibilities under the supervision of classroom teachers and faculty in the Department of Elementary Education at San Francisco State University. Classroom teaching will begin early in the first semester and will continue throughout the three semesters of the Program. Opportunity will be provided to immediately utilize the understanding and skills developed in University classes as credential candidates (interns) work with children in elementary school classrooms.

For the purposes of this Program, students will be designated as first semester interns, second semester interns, and student teaching interns to reflect each level of the Program. The term "intern" is used to connote (1) an enhanced teacher preparation program; (2) the shared responsibility for the program, including the increased responsibility of field personnel; and (3) the emphasis on a **PLAN/ACTION/REFLECTION/ANALYSIS FORMAT**. An internship is not a paid position.

- 6) Field Based Instruction - Field practitioners will share the responsibility for the education of the prospective teachers in this Program. Clinical teachers, University professors, and interns will observe one another teaching groups of children. Critiques and observations will be exchanged and discussed. Clinical teachers, University professors, and interns will conference (triad conferences) regularly. These conferences will link the field experiences to the professional education and academic programs.

- 7) Semester Weeks - Semester weeks are in-depth explorations of a particular topic. These topics vary according to the semester. They occur mid-semester, and all regular classes are not in session during this week.

The first semester week topic is Health Education. It is an extension of the "Child in the Urban Schools" course. Speakers from the substance abuse field, including school program staff members, will address the students. Field trips to local agencies which provide family health needs will be required of the students.

The second semester week topic introduces Art, Film, and Video in the Classroom. It is an exploration into the visual and performing arts, including the ethnic arts, and their integration with the elementary school curriculum.

The third semester week topic is The Profession: Teaching, Urban Policies and Your Career. During this week, students will integrate what they have learned and will be guided in the realization that there are practices and policies external to the classroom that impact upon their careers. A familiarity with the school restructuring literature will lead to the awareness of the importance of collegial collaboration in the improvement of the instructional program.

The Program Curriculum

Introduction

The Program meets the fifth-year requirement for prospective teachers and leads to the clear credential. Clear credential components, health education, and computer education are included in the newly constructed courses. The Program was augmented by the existing mainstreaming component; that is, it is a joint course offered by the Departments of Elementary Education and Special Education. Students will schedule this course during the second semester of the program.

First Semester

The Child in the Urban School (4 credits) - A foundations course with a particular emphasis on the school as a community, learning and teaching styles, classroom management, and urban problems and child development, especially as they relate to teaching in ethnically, culturally and linguistically diverse classrooms. Included will be a component on health education and community services. This course requires three clinical experience hours per week, supervised by school and University personnel.

Reading, Language Arts, and Social Studies in the Elementary School (8 credits) - An integrated, interdisciplinary course

emphasizing learning to read and reading to learn using "whole language learning," and approaches which address the needs of limited English proficient and second language acquisition students. Social studies will be integrated with reading and language arts focusing on multicultural and global perspectives. This course requires six clinical experience hours per week, and will be supervised by school and University personnel.

Semester Week Topic: Health Education - Guest speakers on substance abuse - field trips to community health agencies.

Second Semester

Multicultural Education (4 credits) - An examination of a wide range of cultural groups in schools, such as handicapped persons, females, and various ethnic groups with an emphasis on theory and instructional practice.

Science, Math, and Technology in the Elementary Schools (7 credits) - An integrated curriculum course emphasizing conceptual approaches, such as the use of manipulatives, exploratory teaching, cooperative groups, and development of problem solving/thinking skills.

The above two courses will require a 12-hour per week internship in clinical schools.

Semester Week Topic: Art, Film, and Video in the Classroom

EED/SED 662 - Elementary School Mainstreaming (3 units) - Identifying characteristics of various handicapping conditions. Expanding concepts of learning styles and criteria for selecting materials for individualized instruction to implement the mainstreaming component with reference to the elementary classroom. Study includes instruction and assessment, diagnostic procedures and educational planning, recognition of sensitivity to individual strengths and weaknesses, differences and similarities, and cultural and linguistic factors.

Third Semester

Student Teaching Internship (12 credits) - A minimum of two, 7-week, full-time placements in inner city, multicultural environments. This culminating student teaching experience will be structured to include individual, small group, and whole-class responsibility with a solo week at the end of both placements.

Internship Seminar (3 credits) - The culminating seminar, incorporating teacher problem solving, decision making, and self-reflection. A professional portfolio will be prepared and evaluated. University and school district personnel will conduct the seminar.

Semester Week Topic: The Profession: Teaching, Urban Policies and Your Career

Course Descriptions and Sample Course Content

The Child in the Urban Schools (4 credits) - A foundations course which emphasizes children's development in a variety of cultural, ethnic, and language backgrounds. It will examine the social, psychological, socio-economic and cultural factors related to teaching diverse groups in urban schools. Current practices and policies, as well as problem areas (school dropout, effects of distribution of resources, conflict management, etc.) will be explored. Other themes include learning and teaching styles, classroom management, building the classroom community, and the influence of personal values on learning expectations. The course will emphasize diversity as a positive resource, and will include a supervised field experience component.

Sample Content

Child development principles, research, and practice.

Classroom management and organization, including issues specific to urban classrooms.

Alternative models of teaching and learning, including exploration of strategies such as working with the entire class, cooperative groups, and individuals.

Dealing with children confronted by contemporary pressures.

Use of the community as a positive resource.

Recognizing and dealing with cultural bias and prejudice in teaching materials.

Family expectations and socio-economic demands.

Knowledge and attitude on the use and misuse of substances, including alcohol, drugs, anabolic steroids, tobacco, and narcotics.

Skills for individual responsibility and decision making for health.

Information on sexually transmitted diseases, including Acquired Immune Deficiency Syndrome.

Nutritional habits and physical conditioning patterns that promote a high level of well-being.

Dealing with ethnic, linguistic, socio-economic and cultural diversities in the classroom, and the opportunities that this diversity presents.

Reading, Language Arts, and Social Studies in the Elementary School (8 credits) - An integrated curriculum course which addresses general principles and practices in teaching social studies and reading/language arts. This course will emphasize the integrated/cross-disciplinary approach to planning and teaching in culturally and linguistically diverse settings, using social studies as a vehicle of instruction; instructional methods for working with second language learners; the effects of home and school culture on learning; and the use of multicultural materials.

Sample Content

Theory, research, and pedagogy for learning to read, reading to learn.

Development of critical thinking skills through integration of language arts and social studies content.

Knowledge of environmental, psychological, and sociological factors that influence the desire and ability to learn to read.

Lesson/unit development, classroom organization techniques and materials for teaching reading/language arts and the content areas.

Interdisciplinary approaches to teaching reading, including the development of word recognition, vocabulary, comprehension, and other skills.

Strategies for language development, critical thinking, study skills in the content fields, and reading for culturally diverse classrooms.

Techniques and materials to teach reading through multicultural literature, including cultural history novels.

Ways in which different values and practices of home culture, mainstream culture, and school culture influence achievement in reading, language arts, and social studies.

The interrelation of listening, speaking, reading, writing, and thinking as they relate to bilingualism/biculturalism.

Examination of developmental stages in first and second language acquisition and their effect on reading of social studies content.

Dealing with racial, cultural, and sexual bias in curricular methods and materials.

Integration of ethnic and cultural arts into the reading, language arts, and social studies curriculum.

Multicultural Education (4 credits) - A foundations course which focuses on general understanding of cultural and linguistic diversity with an emphasis on both theory and practice. It will examine how culture is transmitted and structured into subcultures, as well as how it influences learning/cognitive styles. Further, it will address issues such as cultural pluralism, assimilation and acculturation, and cultural bias/stereotypes. Other emphases include language as a vehicle of culture; laws, regulations, and programs regarding second language speakers; and the role of home language upon second language learning in relation to curriculum planning.

The philosophy of the course is extracted from the Banks, Gollnick, and Chinn new definition of multicultural education:

Multicultural education is a multi-faceted, multi-dimensional educational strategy which seeks to: (a) create an educational environment in which a wide range of cultural groups, such as females, handicapped persons, and various ethnic groups, will experience educational equity; (b) establish that knowledge of a student's family and cultural background is a prerequisite for designing sensitive, sensible instruction; and (c) foster inter-cultural, inter-group, and inter-ethnic understanding and harmony in America's classrooms, communities, and culture.

Sample Content

Examination of one's own values, background, and attitudes as related to multicultural teaching.

General understanding and respect for cultural differences.

Understanding of cultural and historical diversity.

Cultural variables and their effect upon student learning.

Potential conflicts and opportunities created between the interaction of two cultures.

Awareness of cross-cultural practices or attitudes and their effect upon the cognitive behavioral and motivational development of children.

language and learning, including bilingualism, dialect, ESL, and sheltered English.

The effect of the home language on second language learning.

Federal court cases, laws, and regulations concerning linguistic diversity.

Mathematics, Science, and Technology in the Elementary School (7 credits) - An integrated curriculum course emphasizing conceptual approaches, such as the use of manipulatives, exploratory teaching, cooperative groups, and the development of problem solving/thinking skills.

Sample Content

Mastery of all concepts and skills included in mathematics, science, and technology content areas, K-8, as delineated in the California curriculum frameworks.

Inclusion of multicultural mathematics and science curriculum topics at every level. Examples include various number systems, games and activities from all cultures, and historical contributions from ethnically and culturally diverse sources.

Emphasis on integration of mathematics, science, and technology wherever possible, and inclusion of prepared curriculum units such as A.I.M.S., Descubrimiento/Finding Out, and integrated instructional television programs.

Exploration of mathematics, science, and technology with the focus on conceptual approaches, such as the use of manipulatives, exploratory teaching, cooperative groups, and the development of problem solving/thinking skills.

Use of calculators, video, and computer software which incorporates both skills and problem solving learning. Beginning logo and wordprocessing will also be introduced.

Strategies for teaching all students, including non-English speaking, limited English speaking, second language learners, and those students with learning disabilities who have been mainstreamed into the regular classroom.

Working with community and family values at every level of the curriculum, especially in the context of problem solving/thinking.

Exploration of the basic operations, terminology, and capabilities of computer-based technology, and use of hardware, software, and systems, and the ability to apply the technology to

instruction in the subjects and grades authorized by the credential.

Working with representative programs appropriate to the subject and grades authorized by the credential in the areas of computer applications and tools, computer-assisted recordkeeping, generating instructional materials, and managing instruction.

Identification of issues involved in the access, use, and control of computer-based technologies including positive and negative impacts, moral, legal, and ethical implications, and economic and social implications including providing equitable access.

EEd/SED 662 - Elementary School Mainstreaming (3 units) -
Identifying characteristics of various handicapping conditions. Expanding concepts of learning styles and criteria for selecting materials for individualized instruction to implement the mainstream component with reference to the elementary classroom. Study includes instruction and assessment, diagnostic procedures and educational planning, recognition of sensitivity to individual strengths and weaknesses, differences and similarities and cultural and linguistic factors.

Sample Content

Recognize children's academic strengths and weaknesses, perceptual characteristics, and preferred learning modalities (i.e., auditory, visual, kinesthetic) through formal and informal assessment procedures appropriate for classroom teachers.

Adaption of methods and curricula materials that would accommodate various handicapping conditions.

An awareness and understanding of the legislation underlying mainstreaming. The process of developing and implementing IEP and due process procedures.

Assess the characteristics and behavior of exceptional students in terms of program and developmental needs.

Recognize the differences and similarities of exceptional and non-exceptional students.

Analyze non-discriminatory assessment, including a sensitivity to cultural and linguistic factors.

Produce and evaluate short and long-term educational objectives for regular classroom aspects of the individualized education program goals.

Utilize various diagnostic/prescriptive materials and procedures in reading, language arts, math, and perceptual motor development.

Meeting the Legal Preconditions for Approval of an Experimental Program

The institution will comply with the legal preconditions regarding:

- 1) Admission to the Program prior to approval by the Commission;
- 2) Obtaining a certificate of clearance from the Commission which verifies the candidate's personal identification; and
- 3) Requiring applicants to pass the CBEST test prior to admission.
- 4) Requiring the Bachelor of Arts or Science degrees. All candidates are post-baccalaureate students.

The institution will comply with the preconditions established by the Commission for the approval of experimental programs by ensuring that:

- 1) Annual reports and a final report are submitted to the Commission;
- 2) Information is provided regarding program enrollments as requested by the Commission; and
- 3) All other preconditions specified by the Commission are met.

PROGRAM EVALUATION

This section discusses the plans for evaluating the overall effectiveness of the Program in relationship to the stated objectives.

The Program objectives are as follows:

Objective #1: To restructure the Multiple Subjects Credential Program to reflect best practice and research pertaining to teacher education.

The restructured teacher preparation program will be submitted to a panel of experts who will give their opinion as to whether the Program is consistent with best practice as described in the teacher education literature.

Objective #2: To develop models of shared responsibility between clinical teachers and University faculty in the preparation of credential candidates.

Reports will be obtained from clinical teachers and University faculty as to the degree to which they are sharing responsibility for the credential candidates. The greater consensus among respondents will be viewed as evidence of the successful accomplishment of this objective.

Objective #3: To provide 24 credential candidates with enhanced teacher preparation experiences at six clinical school sites.

This objective will be attained if there is a consensus among clinical teachers that the experiences of candidates in this program are enriched and enhanced when compared to traditional program.

Objective #4: To evaluate the effectiveness of the Program.

A questionnaire based upon Commission standards, Category 5, will be administered to students in the traditional program and students in the Clinical Schools Program. This objective will be achieved if there is a higher level attainment by students in the experimental program.

Objective #5: To introduce successful practices of the experimental program into the regular program, as appropriate.

At the beginning of the second semester of the Program, an Institutionalization Team will be established and headed by the Co-chair, Graduate Division of Teacher Education. The consensus of the Institutionalization Team that elements of the experimental program are being phased into the regular program, and documentation of that fact, will be an indicator that this objective has been attained.

Objective #6: To conduct field-based research, inquiry, and evaluation activities which contribute to the generation of new knowledge regarding teaching, learning, and teacher education.

Data Collection. The collection and analysis of data that allow the research questions described in this proposal to be answered satisfactorily will be the indicator of attainment. The achievement of the program objectives will be evaluated by analyzing data gathered from:

- 1) In-depth interviews with Clinical Schools Program participants, classroom teachers, site administrators,

and University faculty to ascertain the effectiveness of the Program components;

- 2) In-depth interviews with a randomly selected sample of candidates in the traditional Program;
- 3) Videotapes of the Program, including the planning, action, reflection, and analyses processes;
- 4) Administration of a rating scale to credential candidates to assess their attitudes and beliefs on a variety of dimensions;
- 5) Analysis of candidates' journals;
- 6) Ethnographic observation of the teaching process.

The methodologies previously described in this proposal will be used.

CANDIDATE ASSESSMENT

Introduction. This section discusses interim and final candidate assessment. Both will be based on criteria from Category 5 of the Commission standards and Chancellor's Executive Order #547.

Data regarding candidate competence will be collected from four sources:

- 1) Clinical teacher ratings using a rating scale;
- 2) Self-evaluation, including a narrative description statement after each category;
- 3) Comparison of the performance by observation or videotape at the beginning and end of the program; and
- 4) Student developed portfolio.

The emphasis will be on analysis over time to determine candidate growth. A minimal level of student competence will be determined by consensus. During the first semester of the project, additional efforts will be made to operationalize the rating scale by establishing additional specific factors to consider, where necessary.

Interim Assessment. This will include:

- 1) A "B" average in all course work;

- 2) Determination by the clinical teacher and University supervisor of successful completion of the field work;
- 3) Interim interview by University supervisor to ascertain continued eligibility for the Clinical Schools Project based on demonstrated success in the urban school environment; and
- 4) Completion of the self-evaluation form based on the Commission competency standards.

Final Assessment. This will include:

- 1) Completion of interim assessment after each semester;
- 2) A score of four or five in all topics of Category 5 of the Commission standards as determined by the clinical teacher during the student teaching internship;
- 3) A portfolio of documents to support these topics from the following Commission standards:
 - a) (2.1) Clearly stated plans;
 - b) (2.2) Completed unit of instruction;
 - c) (3.3) Candidate prepared materials;
 - d) (3.4) Candidate prepared anti-bias materials;
 - e) (5.1) Example of written language directed to children;
 - f) (6.3) Collection of elementary school student work;
 - g) (9.2) Written cultural ethnography of one placement, which includes photographs; and
 - h) (10.2) An example of written parent communication;
- 4) Written personal philosophy of education.

Information obtained from the various data sources will be considered and shared with interns and Clinical teachers where appropriate to assist them in the development of candidate competence, as well as to gain insight into possible answers to the research questions that are the central focus of this study.

STRUCTURE OF THE CLINICAL SCHOOLS PROGRAM

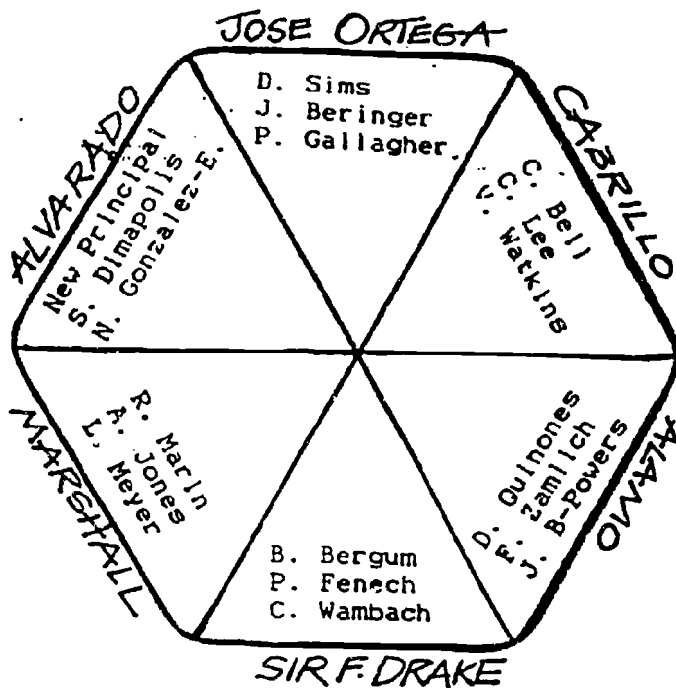
The Clinical Schools Program will have a structure which ensures collaboration between the SFUSD and SFSU (see Model A, page 19a attached). The model delineates the Instructional Site Team led by a University professor, principal, and clinical teacher acting as site coordinator at each school. Other members of the team are clinical teachers and interns. These teams will (1) provide support for project participants at their sites; (b) identify ideas, agenda items and concerns to be brought to the Executive Team; (c) assure the smooth running of the project at their site, which includes tailoring the principles of the Program to the needs of the site; and (d) process and clarify items brought to the Site Team by the Executive Team. Each Site Team will meet once per month.

The University supervisor will coordinate the activities of the first semester interns at that site, and be responsible for supervising the interns on a monthly basis.

The Executive Team is the decision making body and will be composed of two principals, two teachers, two supervisors, the director, liaisons, and the support teacher. During the first semester, the members of the Executive Team will be appointed; thereafter, half of the Team will rotate annually. The composition of the team will include at least one member from each site team. The Executive Team will meet monthly.

The Advisory Team, composed of University, school district and union administrators, as well as the director, liaisons and outside funders, will meet once each semester. Its function is to provide Program direction and guidance, to suggest possible avenues of funding, and to review Clinical Schools Program progress reports. The Dean, School of Education, SFSU; the Deputy Superintendent, SFUSD; and the President of USEF will act as ex-officio members of the Advisory Team.

STRUCTURE OF THE CLINICAL SCHOOLS PROGRAM



THE CLINICAL SCHOOLS

SITE TEAM LEADERS:

Principal
Site Coordinator
University Supervisor

SITE INSTRUCTIONAL TEAMS:

Principal
Site Coordinator (Clinical Teacher)
University Supervisor
Clinical Teachers
Interns



THE EXECUTIVE TEAM is the decision making group. Participants are:

Two Principals
Two Site Coordinators
Two University Supervisors
Director and Assoc. Director
Liaisons



THE ADVISORY TEAM:

Funders
University/District/Union Administrators
Director and Associate Director
Liaisons

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APPENDIX I

HISTORY OF THE CLINICAL SCHOOLS PROJECT

The concept of professional development schools began in 1985 when Drs. Fannie Preston, Bill Hammerman, Mary Ellen Ianni and Jane Bernard-Powers formulated the clinical schools network. Their idea was to create a student teaching internship program between the SFUSD and SFSU. They began by placing student teachers in a select number of schools where the inservice teachers would be trained in Clinical Supervision techniques. This initial bonding between the University and the schools was strengthened in 1988 when the Ford Foundation funded a planning grant to formally propose a joint teacher education program between the SFUSD, SFSU and the UESF.

As a result of a year spent in preparing the Program and selecting proposed sites, six schools were identified to participate in this collaborative effort. Some of the criteria for selection of school sites included: (1) ethnically diverse student populations which reflect the composition of the San Francisco population; (2) schools which reflect the complexities of urban issues, problems, and opportunities; (3) varieties of teaching skills and styles; (4) willingness to reflect upon one's teaching and curriculum and make necessary changes; and (5) willingness to participate in the training of interns. The schools chosen represent diverse neighborhoods, school styles, social classes and philosophies, and all are all enthusiastic about the project.

During the 1989-90 school year, the schools participated in a pilot project, including completing the design of the new program. During the 1990-91 school year, approval will be requested to commence the Clinical Schools Program with the structure for full collaboration in place.

The Direction Committee, chaired by Dr. Cecelia Wambach, planned the Clinical Schools Program. During the school years 1986-87 and 1987-88, the faculty worked to develop its vision for the teacher education program. The concepts embodied in the Clinical Schools Program are a result of the collaborative effort of faculty and school district personnel. These include:

- 1) Emphasis on linguistically, culturally, and ethnically diverse classrooms;
- 2) Site (elementary school) based participation as interns in urban schools;
- 3) Integrated curriculum courses; and
- 4) Participation by classroom teachers in the preparation of new teachers.

PROPOSED MASTER OF ARTS PROGRAM - 1991-92

During the 1989-90 school year, the Directions Committee in the Department of Elementary Education started an information gathering process related to a Master of Arts in Education concentration in curriculum and instruction. During the first year of this experimental program, the curriculum for this Master's degree will be fully developed and submitted through regular University channels for approval of a new concentration. A new concentration can be started with approvals internal to the campus. The goal will be to eventually develop a freestanding Master of Arts in Teaching or in Multicultural Education which will require inclusion on the CSU Master Plan and approval by the Chancellor's Office. The interim degree will be a Master of Arts in Education with a concentration in Elementary Education or Multicultural Education.

It is the intent for the Master of Arts degree program to be an extension of the Clinical Schools Program, including the concentration. Students completing the Clinical Schools Program would obtain the Master's degree. All course work would count toward the M.A. degree with the exception of the Basic Methodology courses. It is envisioned that 8 units of course work from the basic program will be applicable to the Master's degree program: The Child in the Urban School (4); Multicultural Education (4).

Induction Year - First Year of the Master of Arts Program

Participation in the Induction Program will introduce the new teacher to an experiential course of study where his/her classroom is the laboratory. Mentor teachers and University faculty will provide support and guidance, and the new teacher may earn the Master of Arts in Teaching or in Multicultural Education.

First Semester

Seminar I: The Teacher as Scholar (3 credits) - An experiential program which emphasizes professional development and growth, reflective teaching, introduction to classroom research, curriculum and managerial resources, and emotional support. Students will meet twice monthly for the seminar, and all projects or assignments will center around the new teacher's classroom. Topics to be included as determined from the research and literature on beginning teaching are:

- 1) Teaching content and the relationships between content and pedagogy;
- 2) Classroom management and organization, including planning and time management;

- 3) Problem solving and emotional support;
- 4) Teaching children with special learning and behavioral needs;
- 5) Creating a learning environment in ethnically, linguistically, and culturally diverse classrooms;
- 6) Working with parents and other adults in the school setting; and
- 7) Handling professional functions and responsibilities.

New teachers will be expected to complete an ongoing ethnography of their classroom, prepare a personal professional growth and development plan, and plan and execute various projects and units with their classes. Some supervision will be conducted by University and/or school district personnel.

MINI COURSES - Mini courses may be taken according to interest and scheduling, but it is suggested that the beginner not take other courses during the first semester of teaching.

Second Semester

Seminar II: The Teacher as Researcher (3 credits) - A continuation of the workshop from the first semester, again with projects and units based on the new teachers' classroom needs.

Mini Courses (1.5 credits) - May be taken according to interest.

OTHER GRADUATE LEVEL COURSES - As specified for the Master of Arts in Education, concentration in Elementary Education or Multicultural Education.

THIRD SEMESTER AND/OR CONTINUED PROFESSIONAL GROWTH

Entering the third semester of the Master's degree program, students will have secured 14 credits. To complete the program, the requisite courses are:

Required Courses

ISED 797 - Seminar in Educational Research (3 credits)

E ED 760 - Seminar on Social Issues and Curriculum Development (3 credits)

E ED 898 - Master's Thesis (3 credits), or

E ED 895 - Field Study (3 credits)

One or more of the following (all 3 credits):

E ED 761 - Seminar in Curriculum in Elementary School Mathematics

E ED 762 - Seminar in Curriculum in Elementary School Language
Arts

E ED 765 - Seminar in Curriculum in Elementary School Science

E ED 767 - Seminar in Curriculum in Elementary School Creative
Arts

_____ - Seminar in Multicultural Education

Related or distributed field courses selected upon approval of graduate major advisor (6 credits). These may include mini course credits. The following courses are suggested toward partial completion of this requirement:

E ED 700 - Seminar in Physical, Social, Emotional Development

E ED 702 - Creative Experiences with Preschool Children

E ED 705 - Child Development through Literature for Children

E ED 707 - Seminar in Cognitive Development in Early Childhood
Education

E ED 720 - Improvement of Reading

E ED 725 - Language Learning and Reading

E ED 760 - Seminar on Social Issues and Curriculum Development

E ED 761 - Elementary School Mathematics: Problem Solving

E ED 764 - Elementary School Social Studies

E ED 850 - Seminar in Early Childhood Mathematics and Science

E ED 874 - Teaching Reading/Language Arts to Second Language
Learners

ISED 744 - Issues in Multicultural Education

ISED 891 - Language and Cultural Institute in Spanish

ISED 891 - Language and Cultural Institute in Chinese

Sample Mini Courses

ETH S 210 - Asian American Culture

ETH S 270 - La Raza Experience

ETH S 260 - The African American in Western Racism

TOTAL CREDITS: 32 MINIMUM

PROPOSED INTERIM DEGREE

Master of Arts in Education, concentration in Elementary
Education or Multicultural Education

Program

The Child in the Urban School (4 credits)

Multicultural Education (4 credits)

Seminar I - The Teacher as Scholar (3 credits)

Seminar II - The Teacher as Researcher (3 credits)

Seminar on Social Issues and Curriculum Development (3 credits)

Selected advanced content curriculum course (3 credits)

Electives (6 credits)

Seminar in Educational Research (3 credits)

Thesis or Field Study (3 credits)

Total: 32 credits